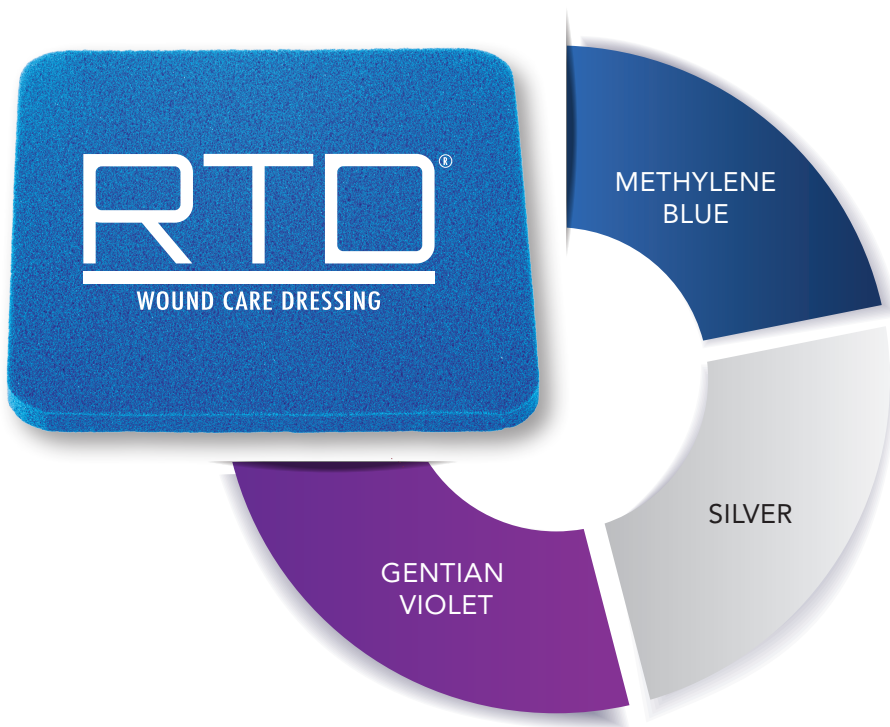


RTD[®] WOUND DRESSING

TRIPLE ACTION:

Absorbent Polyurethane foam with three active ingredients
Methylene Blue, Gentian Violet and Silver



KENERIC
HEALTHCARE

DOES THE JOB, START TO CLOSE!

What is RTD® Wound Dressing?

RTD® is a proprietary highly absorbent antimicrobial foam with Methylene Blue (0.25 mg/g), Gentian Violet (0.25 mg/g) and Silver Zirconium Phosphate (7 mg/g) integrated into the polymer matrix.

Indications for Use:

RTD® Wound Dressing is indicated for the treatment of partial to full thickness wounds with moderate to heavy exudate, including pressure ulcers, venous stasis and arterial ulcers, diabetic foot ulcers, graft wounds and donor sites, surgical/post-operative wounds, 1st and 2nd degree burns, lacerations and abrasions and any other wound inflicted by trauma.

RTD® Features and Benefits

Active ingredients: Silver, Methylene Blue and Gentian Violet

- Draws protein rich exudate away from wound; creates a favorable wound healing environment
- Effective antimicrobial and antifungal properties; reduces bacterial load (1)
- Early and sustained antimicrobial protection (2); helps prevent biofilm
- Analgesic; significant pain reduction reported (3)
- Non-cytotoxic (2); use throughout the continuum of care
- Cost effective; reduces healing time (4); use up to 3 days

Proprietary technology: Active ingredients are integrated into foam matrix

- Open cell structure; wicks exudate vertically
- Absorbs 1,110 mg/cm²; > 25% more than other foam dressings (2)
- Holds 20 x its weight in exudate. A 4 x 4 x ¼ dressing holds 115 ml (2)
- Active ingredients are tightly bound to the foam
- Regulates wound bed moisture; little to no maceration

Polyurethane foam is soft pliable and surface conforming:

- Easy to use. Ready to apply. No need to hydrate before use
- Can be easily cut to size
- Versatile; can be used for multiple wound types



GET CLOSURE WITH RTD® WOUND DRESSING!

RTD® Mechanism of Action

Methylene Blue

- Strong affinity for dead cells not viable cells
- Strong Cation: draws negatively charged bacteria
- Pulls the protein rich exudate (bacteria and dead tissue) into the dressing

Gentian Violet

- Attacks gram(-) and gram(+) bacteria
- Antibacterial and Antifungal
- Analgesic

Silver Zirconium Phosphate

- Silver ions (Ag+) are released in the presence of exudate
- Amount of Silver ions released are proportionate to the amount of exudate
- Silver ion (Ag+) binds to bacterial cells
- Penetrates and kills gram (-) and gram (+) bacteria



Broad Spectrum Antimicrobial Protection Against Common Wound Pathogens!

Wound Pathogen	Log10 Reduction
Staphylococcus Aureus MRSA	>5.74, 24 hrs
Vancomycin-Resistant Enterococci, VRE	>2.20, 48 hrs
Staphylococcus Aureus	>4.59, 24 hrs
Pseudomonas Aeruginosa	>4.33, 24 hrs
Escherichia Coli	>3.21, 24 hrs
Salmonella Cholerasuis	>3.73, 24 hrs
Clostridium Sporogenes	>2.37, 48 hrs
Bacillus Subtilis	>2.81, 24 hrs
Aspergillus Niger	>3.51, 24 hrs
Candida Albicans	>3.54, 24 hrs

RTD® was tested by an independent lab for antimicrobial activity using zone of inhibition and Log10 reduction assays against common chronic wound pathogens (2)



GET RESULTS WITH RTD® TRIPLE ACTION!

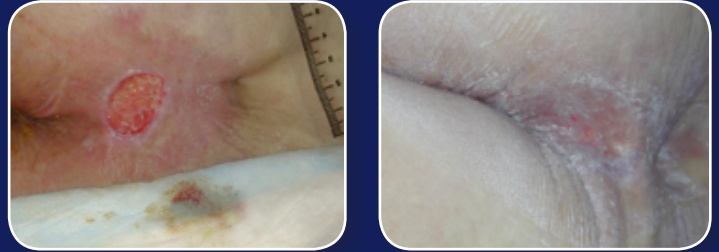
RTD® effectively manages and closes many difficult to heal wound types.

Case 1: Pyoderma Gangrenosum



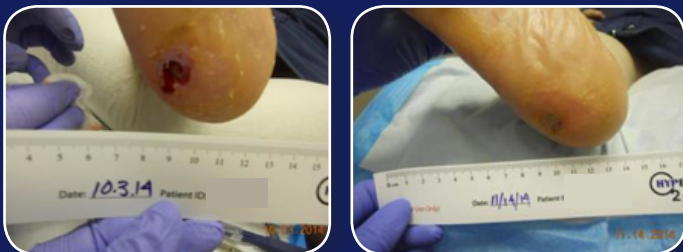
64-year-old female with chronic pyoderma gangrenosum wound on right posterior leg. Patient was treated with hyperbaric and NPWT regimen for one year with no resolution. Wound pockets were 5cm deep. The wound healed after 48 days of treatment with RTD® Wound Dressing.

Case 2: Pressure Ulcer



82-year-old female with chronic stage 3 pressure ulcer located at the coccyx. Patient was frequently incontinent of urine and stool. Infection could not be resolved with previous treatment of multiple antibiotics. The wound was completely healed after 96 days with RTD® Wound Dressing.

Case 3: Diabetic Foot Ulcer



50-year-old female with chronic non-healing diabetic ulcer; present for 6 months. Patient received treatment from infectious disease specialist and was given both oral and IV antibiotics for 3 months without resolution. Patient was referred to wound care center for further evaluation and treatment. The patient was initially treated with Iodasorb, gauze and offloading for 14 days. The wound was completely healed after 40 days with RTD® Wound Dressing.

Case 4: Surgical Wound (removal of skin cancer)



88-year-old female with a post-operative wound following removal of skin cancer, complicated by underlying venous insufficiency. The wound was present for approximately one month, was not progressing and presented with large amounts of malodorous drainage. The patient was initially treated with Medihoney and Anasept gauze for 16 days. The wound healed after 46 days with RTD® Wound Dressing.

RTD® Wound Dressing is available in a variety of sizes and thicknesses and can be purchased through most healthcare distributors.

1/4" thickness – moderate to heavy exudate
2"x2", 4"x4", 4"x5"

1/8" thickness – light to heavy exudate
2"x2", 4"x4", 4"x5"

For more information on how to order or for a RTD® product trial please call **1-855-872-2013** or email customerservice@kenerichc.com

References:

- 1) Keneric Healthcare: Data on file 2014
- 2) Keneric Healthcare: Data on file 2006
- 3) Keneric Healthcare: Data on File 2006
- 4) Marcus B, Kaufman K, Chio T. Case Closed: A dressing for chronic and acute wounds. *Ostomy Wound Manage.* 2014; 61(4):12-14.