



Strong Meets
Supple

CopiOs[®]

Pericardium Membrane

1 Demonstrated Performance

- Clinically demonstrated performance in guided bone regeneration procedures,^{1,2} where ease of manipulation and adaptability to surface contours is essential

2 Long-Lasting

- Shown to provide a stable, long-lasting barrier during healing and integration of Puros[®] Allografts and staged or immediately placed implants^{1,2}

3 Retains Natural Tissue Structure

- Supports an aesthetic soft-tissue response^{1,2} through facilitation of cell attachment and proliferation and remodeling into vascularized connective tissue^{1,3}
- Retains the structure and composition of natural tissue due to the proprietary Tutoplast[®] process, leading to optimal performance and handling^{1,2}



The Unique Tutoplast Process

For over 40 years, Tutoplast processed tissues have been safely used in more than 6 million procedures.⁴

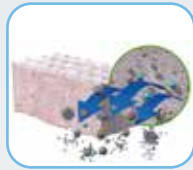
The proprietary Tutoplast process assures the highest standard of tissue safety and quality with minimal risk of disease transmission.⁴ The process preserves the valuable collagen matrix and tissue integrity while inactivating pathogens and gently removing unwanted materials, such as cells, antigens, and viruses.⁴ The result is safe, biocompatible tissue.



1. Alkaline Treatment



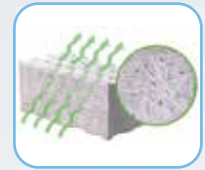
2. Osmotic Treatment



3. Oxidative Treatment



4. Solvent Treatment



5. Irradiation

Take a closer look



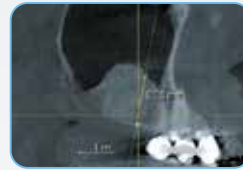
X-ray of initial situation.



Sinus lift using Puros Allograft Cancellous Particles.



CopiOs Pericardium Membrane draped over lateral window.



4-months post-operative CBCT scan.

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Ordering Information

Catalog #	Description
97002	CopiOs Pericardium Membrane, 15 x 20 mm
97003	CopiOs Pericardium Membrane, 20 x 30 mm
97004	CopiOs Pericardium Membrane, 30 x 40 mm

1. Kistler S, Bayer G, Kistler F, Am Lech L. Experience with the biological Tutodent membrane in implant practice. *Implantologie Zeitung Journal*. 2004;8(7):47-48.
2. Simsek B, Simsek S. Evaluation of success rates of immediate and delayed implants after tooth extraction. *Chinese Medical Journal*. 2003;116(8):1216-1219.
3. Steigmann M. Pericardium membrane and xenograft particulate grafting materials for horizontal alveolar ridge defects. *Implant Dent*. 2006;15:186-191.
4. Data on file with RTI Surgical, Inc.

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