# BIOTECK®

total biocompatibility

ideal osteoconduction

complete remodeling

# natural bone substitutes

bio-gen osteoplant biocollagen DBM

granules, gel, putty and blocks sheets and membranes gel and membranes granules, paste and gel

## Enzymatic process

### Zymo-Teck<sup>®</sup>: the secret of quality grafts



**Bioteck bone substitutes** are obtained from equine bone tissue treated with **Zymo-Teck**<sup>®</sup>. This exclusive proprietary process is based on the utilization of lytic enzymes operating at controlled temperatures. This enables the complete elimination of the antigen components of the tissue, without the mineral phase undergoing any changes. The unmodified bone mineral component is recognized as endogenous by the osteoclasts, thereby allowing for the total remodeling of the graft, which is completely replaced, in physiological time, by new patient vital bone tissue.

The best possible condition for osseointegrated implants.

### enzymatic process

beta ray sterilization

safety and quality

total **biocompatibility** 

## complete remodeling

# natural bone substitutes

# 

### Granules

Bio-Gen granules are a total osteoclastic remodeling bone substitute, which can be used for all types of bone defects.

4 - 6 months (cancellous)
8 - 12 months (cortical)

**Clinical uses** 

- recommended for small size, four walls bone defects (cancellous)
- recommended for larger size bone defects (cortical)

**BIOTECK**<sup>®</sup> The science of bone tissue

### **Remodeling time:**

**BGS-15** Bio-Gen cancellous granules **BGS-05** Bio-Gen cancellous granules **BGS-10** Bio-Gen cancellous granules **BGS-09** Bio-Gen cancellous granules **BGS-11** Bio-Gen cancellous granules **BGS-23** Bio-Gen cancellous granules **BGS-21** Bio-Gen cancellous granules **BGS-22** Bio-Gen cancellous granules **BGC-05** Bio-Gen cortical granules BGC-05n Bio-Gen cortical granules **BGM-10** Bio-Gen cancellous/cortical granules **BGM-05** Bio-Gen cancellous/cortical granules BGM-05n Bio-Gen cancellous/cortical granules **BGM-100** Bio-Gen cancellous/cortical granules **BGM-20** Bio-Gen cancellous/cortical granules

1 btl / 0.5 g ≈ 1 cc	250 - 1000 µm
6 btl / 0.5 g ≈ 1 cc	500 - 1000 µm
1 btl / 0.5 g ≈ 1 cc	$1000$ – $2000~\mu m$
6 btl / 0.5 g ≈ 1 cc	$1000$ – $2000~\mu m$
6 btl / 1 g ≈ 2 cc	$1000$ – $2000~\mu m$
6 btl / 1 g ≈ 2 cc	$2000 - 3000 \ \mu m$
1 btl / 2 g ≈ 4 cc	250 - 1000 µm
1 btl / 2 g ≈ 4 cc	$1000$ – $2000~\mu m$
6 btl / 0.5 g ≈ 1 cc	500 - 1000 µm
1 btl / 0.5 g ≈ 1 cc	500 - 1000 µm
6 btl / 0.25 g ≈ 0.5 cc	500 - 1000 µm
6 btl / 0.5 g ≈ 1 cc	500 - 1000 µm
1 btl / 0.5 g ≈ 1 cc	500 - 1000 µm
6 btl / 1 g ≈ 2 cc	500 - 1000 µm
1 btl / 2 q ≈ 4 cc	500 - 1000 µm



### **Gel Granules**

Bio-Gen Mix Gel is a mixture consisting of Bio-Gen Mix cortical-cancellous granules and water-based gel. It is extremely practical and easy-to-handle. It can be applied directly in the graft site. Useful for all defect types.

Clinical uses:	<ul> <li>recommended for all types of defect</li> <li>excellent for maxillary sinus lift (Summers)</li> <li>excellent for very large periodontal defects</li> </ul>
Remodeling time:	<ul> <li>4 - 6 months (cancellous)</li> <li>8 - 12 months (cortical)</li> </ul>

BGM-GEL05	Bio-Gen mix gel cancellous/cortical granules	3 syr 0.5 ml	500 – 1000 µm
BGM-GEL05n	Bio-Gen mix gel cancellous/cortical granules	1 syr 0.5 ml	500 - 1000 µm
BGM-GEL1	Bio-Gen mix gel cancellous/cortical granules	3 syr 1 ml	500 - 1000 µm
BGM-GEL1n	Bio-Gen mix gel cancellous/cortical granules	1 syr 1 ml	500 - 1000 µm
BGM-GEL2	Bio-Gen mix gel cancellous/cortical granules	1 syr 2 ml	500 - 1000 µm



### **Demineralized Bone Matrix (DBM)**

Bioteck Activagen and Angiostad are osteopromotive bone grafts containing Demineralized Bone Matrix (DBM). Demineralization process completely exposes type I collagen and organic extracellular matrix, thus enhancing the bone healing process.

### **Clinical uses:**

in combination with Bioteck bone substitutes in order to improve the biological conditions favoring bone regeneration

OGS-AC5	Activagen DBM granules	3 btl	0.5 cc
OGS-ACM500	Activagen DBM moldable paste	3 syr	0.5 ml
OGS-ACM600	Activagen DBM moldable paste	3 syr	1 ml
OGS-GEL1	Angiostad DBM gel	3 syr	1 ml



### Putty

Bio-Gen Putty is a moldable paste made of cancellous Bio-Gen granules and collagen from Achilles' tendon. It's easily moldable, hemostatic and sticks well to bone walls.

Clinical uses:	<ul> <li>recommended for small size, four walls bone defects</li> <li>excellent for post-extractive sockets</li> </ul>
Remodeling time:	• 4 - 6 months
dry (lyophilized) bone	paste 6 btl 0.5 cc

BGP-01Bio-Gen Putty dry (lyophilized) bone paste6 btl 0.5 ccBCP-01nBio-Gen Putty dry (lyophilized) bone paste1 btl 0.5 cc



...

### **Collagen Membranes**

Biocollagen is a membrane made of Achilles' tendon collagen for guided bone regeneration. Its protection time is 4-6 weeks, therefore it is indicated to cover small grafted sites only.

Clinical uses:	<ul> <li>to protect small grafted sites</li> <li>to stabilize granular grafts</li> </ul>			
Protection time:	• 4 - 6 weeks			
collagen membrane	6 htl 15 x 20 x 0 2 mm			

BLG-U2	Biocollagen collagen memorane	0 DTL	15 x 20 x 0.2 mm
BCG-01	Biocollagen collagen membrane	6 btl	25 x 25 x 0.2 mm
BCG-01n	Biocollagen collagen membrane	1 btl	25 x 25 x 0.2 mm
BCG-04	Biocollagen collagen membrane	1 pc	40 x 30 x 0.2 mm

# natural bone substitutes



OTC-CE

OTC-CE2

### **Cortical Membranes**

Osteoplant Cortical Membrane is a flexible cortical bone sheet that works as a long lasting (> 6 months) resorbable membrane.

Clinical uses:	<ul> <li>to protect grafted sites where regeneration is expected to be slow (horizontal and vertical augmentation)</li> </ul>
	<ul> <li>to maintain bone profiles (vestibular ridge reconstruction)</li> </ul>
Protection tin	<ul> <li>6 months (protection)</li> <li>8 - 14 months (total remodeling)</li> </ul>
Osteoplant cortical membrane	1 pc 25 x 25 x 0.2 mm
Osteoplant cortical membrane	1 pc 50 x 25 x 0.2 mm



**OTC-C1** 

**OTC-S1** 

### **Cancellous or Cortical Flex Sheets**

Osteoplant Flex devices are flexible, easy-to-handle, cortical or cancellous bone sheets. Given their flexibility, they adapt perfectly to the receiving site minimizing the risk of defective angiogenesis. They need fixation with screws or similar devices.

~	Clinical uses:	•	vertical ridge a concomitant in (cortical sheet	ugmentation with nplant placement )
		•	horizontal ridg (cancellous sh	e augmentation eet)
		•	sinus lift, to p membrane (Tul	rotect the Schneider asne technique)
Remodeling time:		<ul> <li>4 - 6 months (cancellous)</li> <li>8 - 12 months (cortical)</li> </ul>		
Osteoplant flex Osteoplant flex	cortical sheets cancellous sheets		1 pc 1 pc	25 x 25 x 2-2.5 mm 25 x 25 x 3 mm



### **Cancellous Blocks**

Bio-Gen cancellous blocks are tough, rigid blocks. They feature the same mechanical resistance to compression and elastic deformation of natural bone. They can be shaped with rotating instruments, or drilled, without breaking. They have to be fixed in place with screws or similar.

Clinical uses:	<ul> <li>horizontal or vertical/horizontal ridge augmentation (onlay) upper jaw only</li> <li>inlay grafts</li> </ul>
Remodeling time:	• 6 - 8 months

BGB-11	Bio-Gen cancellous block	1 pc	10 x 10 x 10 mm
BGB-12	Bio-Gen cancellous block	1 pc	10 x 10 x 20 mm
BGB-30	Bio-Gen cancellous wedge	1 pc	25 x 10 x 5 mm (final 2 mm)













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### Zymo-Teck<sup>®</sup> process: the secret of the quality of grafts and membranes



**Bioteck**<sup>®</sup>, a leader in the production of tissue substitutes of natural origin, has developed the exclusive deantigenation **Zymo-Teck**<sup>®</sup> process. The **Zymo-Teck**<sup>®</sup> process, unlike other processes based on high temperature treatments or using chemical solvents, uses enzymes, natural proteins able to precisely and selectively remove the various unwanted substances, making the tissues completely bio-compatible and devoid of treatment residues. **Zymo-Teck**<sup>®</sup> also preserves useful molecules, such as collagen in its natural structure and, operating at controlled temperatures, does not alter the structural characteristics of the tissues.

The stringent in-line quality controls implemented by **Bioteck**<sup>®</sup> at all stages of processing guarantee the highest quality of grafts: to obtain the best surgical outcome.

Improve your knowledge about the **Zymo-Teck**<sup>®</sup> process by selecting the QR-Code on the right.



### Preserved bone collagen



Grafting bone collagen into the defect creates a precise biological condition: osteoblasts, the cells responsible for the formation of new bone tissue, produce collagen fibers that are then saturated by calcium minerals. It's the same three-dimensional structure of collagen that allows the nucleation of crystals of bone apatite, through a physical phenomenon called epitaxy. In addition, the type I bone collagen stimulates, both at cellular and subcellular level, an extremely high number of processes involved in bone regeneration. The presence of bone collagen in **OX**<sup>®</sup> is also demonstrated in polarised light: collagen fibres, having a regular texture, presents a refractivity characteristic that makes it look lighter.

### **Total remodeling**



**OSTEOXENON**<sup>®</sup> is reworked and reabsorbed through the action of osteoclasts. This happens with entirely physiologic kinetics: as well as the patient's bone it is fully remodeled within 8-12 months, as it happens for **OSTEOXENON**<sup>®</sup>: after this period it is completely replaced by the patient's bone. This is possible because **OX**<sup>®</sup>, unlike other materials, is recognized as the optimum substrate by osteoclasts that reabsorb it physiologically; only in this case, in fact, the regenerative process may end with the complete replacement of the graft. If the material is readsorbed physiologically there can be no loss of volume. If the material is reabsorbed too quickly (e.g. calcium phosphate) or too slowly (e.g. synthetic hydroxyapatites) the volume of new endogenous bone is not equal to the grafted volume. **OSTEOXENON**<sup>®</sup>, however, by remodeling itself through osteoclastic activity, it keeps the grafted volume.

## **BI**OTECK<sup>\*</sup>

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around the world. A firm commitmen for the innovative The company colinternational rese basic research and in bone biology. The in-depth knoits research ensurwhich are subject controls, thereby highest quality an **Bioteck**® applies up the doors of its scientific research

### bioteck.com



In over twenty years of made an important co field of tissue biology. The **Bioteck Academ** continuously contrib **Bioteck**<sup>®</sup> products. The Academy has deve at the **dissemination areas of regenerative** participate in this acti More information on **www.bioteckacademy** 

### bioteckacademy.com

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world.

A firm commitment to scientific research forms the basis for the innovative solutions offered by **Bioteck**<sup>®</sup> products. The company collaborates on numerous national and international research projects, which have driven the basic research and helped in writing important chapters in bone biology.

The in-depth knowledge acquired by **Bioteck**<sup>®</sup> through its research ensures the absolute quality of its products, which are subjected to strict environmental and quality controls, thereby guaranteeing a product meeting the highest quality and safety standards.

**Bioteck**<sup>®</sup> applies a policy of total transparency, opening up the doors of its Production and R&D Center for the monitoring of its innovative process and the intense scientific research carried out by its staff.



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CSQ

MED

ISO 13485

# BIOTECK®

# Complete line of collagenated bone substitutes and membranes

ENZYMATIC DEANTIGENATION PRESERVED BONE COLLAGEN TOTAL REMODELING CLINICAL SUCCESS

In over twenty years of scientific research and clinical practice, **Bioteck**<sup>®</sup> has made an important contribution to the clinical/scientific knowledge in the field of tissue biology.

The **Bioteck Academy** is the meeting place of all the excellences that continuously contribute to the development of this knowledge and **Bioteck** $^{\circ}$  products.

The Academy has developed a culture of sharing scientific knowledge aimed at the **dissemination of best techniques and practices in the various areas of regenerative surgery** and is open to all professionals who decide to participate in this activity by sharing their surgical experience.

More information on the activities of the Academy can be found at: www.bioteckacademy.com .

# OSTE



### **GRANULES IN VIAL**

OX37 Cancellous	0.25 g ≈ 0.5 cc	(0.5 – 1 mm)
OX30 Cancellous	0.5 g ≈ 1 cc	(0.5 – 1 mm)
OX33 Cancellous	1 g ≈ 2 cc	(2 – 3 mm)
OX34 Cancellous	1 g ≈ 2 cc	(2 – 4 mm)
OX36 Cancellous	1 g ≈ 2 cc	(0.5 – 1 mm)
OX38 Cancellous	2 g ≈ 4 cc	(0.5 – 1 mm)
OX39 Cancellous	2 g ≈ 4 cc	(2 – 3 mm)
OX40 Cortical	0.5 g ≈ 1 cc	(0.5 – 1 mm)
<b>OX35</b> Cancellous- cortical mix	0.25 g ≈ 0.5 cc	(0.5 – 1 mm)
<b>OX31</b> Cancellous- cortical mix	0.5 g ≈ 1 cc	(0.5 – 1 mm)
<b>OX32</b> Cancellous- cortical mix	1 g ≈ 2 cc	(0.5 – 1 mm)
OX41 Cancellous- cortical mix	$2 g \approx 4 cc$	(0.5 – 1 mm)



### BLOCKS

Cancellous block	1pc	10 x 10 x 10 mm
Cancellous block	1pc	10 x 10 x 20 mm
Cancellous block	2pcs	10 x 20 x 3 mm
Cancellous block	2pcs	10 x 20 x 5 mm
Cancellous- cortical block	1pc	15 x 30 x 5 mm
	Cancellous block Cancellous block Cancellous block Cancellous block Cancellous-cortical block	Cancellous block1pcCancellous block2pcsCancellous block2pcsCancellous block1pc

### OX01 Flexible OX02 Flexible

FLEX



### COLLAGEN MEMBRANE

**BCG-XC30 Collagen membrane** 1pc 30 x 25 x 0.2 mm



### **GRANULES IN SYRINGE**

<b>X21</b> Cancellous- cortical mix	2 syringes	0.25 ml
<b>X22</b> Cancellous- cortical mix	2 syringes	0.50 ml
<b>DX23</b> Cancellous- cortical mix	1 syringe	1 ml



OX03 Cortical OX04 Cortical

# Application table

_		
cancellous sheet	1pc	25 x 25 x 3 mm
cortical sheet	1pc	25 x 25 x 2 - 2.5 mm

### CORTICAL MEMBRANE

	1202	10
membrane	1pc	50
membrane	1pc	25

25 x 25 x 0.2 mm 50 x 25 x 0.2 mm

	Granules in vial				Granules in syringe	Flex S	heets	Blocks	Memb	oranes
= suggested = alternative/optional	OX30 OX37 OX38 Cancellous Granules 0.5-1.0 mm	0X31 0X32 0X35 0X41 Cancellous Cortical Granules 0.5-1.0 mm	0X33 0X34 0X36 0X39 Cancellous Granules 2-3 mm 2-4 mm	<b>0X40</b> Slow resorption Cortical Granules 0.5-1.0 mm	OX21 OX22 OX23 Cancellous Cortical Granules 0.5-1.0 mm	<b>0X01</b> Cancellous Flex 25x25x3 mm	OXO2 Cortical Flex 25x25x3 mm	OX51 OX52 OX54 OX55 Cancellous OX05R Cancellous Cortical	BCG-XC30 Collagen Membrane 30x25x0.2 mm	OX03 OX04 Cortical Membrane 25x25x0.2 mm 50x25x0.2 mm
Periodontal defect (very small, difficult access)										
Periodontal defect - Infrabony defects (1-3 walls) - Furcation defects (class I or II)										
<b>Peri-implant defect</b> (up to 3 exposed threads)										
<b>Peri-implant defect</b> (more than 3 exposed threads)										
Post-extractive socket (preservation)										
<b>Sinus lift</b> (Misch, traditional)			As an alternative to 0X31/32						Also for membrane tear if < 5 mm	
Sinus lift (variation according Tulasne or membrane tear, if > 5 mm)			As an alternative to 0X31/32			As an alternative to 0X-31/32				
Sinus lift (Summers)		As an alternative to 0X21/22								
Horizontal ridge augmentation* (onlay)	To fill gaps, if present	To fill gaps, if present			To fill gaps, if present	As an alternative to 0X-51/52/ 54/55				
Horizontal ridge augmentation (split crest)										
Vertical ridge augmentation and contemporary implant placement (block technique)	To fill gaps, if present	To fill gaps, if present			To fill gaps, if present					
Vertical ridge augmentation and contemporary implant placement (Ludovichetti approach)										
Vertical ridge augmentation* (onlay, two steps)	To fill gaps, if present	To fill gaps, if present			To fill gaps, if present					
Vertical ridge augmentation (inlay)	To fill gaps, if present	To fill gaps, if present			To fill gaps, if present					
Volumetric preservation (for esthetics)										

\* Or a combination of horizontal and vertical augmentation

### **BIOTECK**<sup>\*</sup> The science of bone tissue

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Headquarters



Production and R&D Center

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A Guarantee of Quality and Safety





emical Lab/Quality Control

For more information:













## -xenomatrix: soft tissue regeneration

for a faster tissue healing



tridimensional collagen matrix

clinical **success** 

# n



Through observation under the SEM (Scanning Electron Microscope) it is possible to see the tight knit of collagen fibers that distinguishes the tridimensional Xenomatrix. *Padua University, CUGAS Service Center* 

### Tridimensional collagen **matrix**

**Xenomatrix** is a special collagenic tridimensional matrix made of collagen extracted from equine Achilles tendon through an advanced biochemical process. It's a totally biocompatible scaffold that drives the growth of connective tissue cells. While protecting the underlying bone graft from the connective cells invasion, **Xenomatrix** provides the best substrate for the spreading of soft tissue, accelerating healing.

Accelerated healing times contributes to alleviate the patient's discomfort and to decrease the probability of infection, which would compromise the whole surgery success. Healing is optimal, to achieve the best aesthetic result.

### For outstanding **surgical indications**

**Xenomatrix** is indicated in all those conditions where promoting soft tissue regeneration stands for success. A first application is in the management of **post-extractive socket**. The soft tissue healing with **Xenomatrix** is undistinguishable from healing achievable by simple second intention flap closure. Clinically, faster tissue healing is observed. Epidermal and dermal tissues quality and their final thickness are just identical. Moreover, **Xenomatrix** works as a barrier, preventing connective tissue cells to invade the underlying grafted volume. Providing, therefore, the best condition for a successful bone regeneration and **socket preservation**.





Bilateral case, same patient. Spontaneous healing (up) and healing after grafting Xenomatrix BCG-XC10 (bottom). After 21 days healing at the Xenomatrix side is at a much more advanced stage. *Courtesy Dr. Alessando Leonida - Milan* 





4 months after the procedure one may appreciate how application of the BCG-XC50 tridimensional matrix has resulted in complete cover of the gingival recession. *Courtesy Dr. Giacomo Tarquini - Rome* 

A second application is the treatment of **gingival recessions**, where grafting **Xenomatrix** makes it possible to create a substrate promoting the re-growth of soft tissue, thus avoiding grafting connective tissue from the palate and decreasing the surgical risk and side effects for the patient, achieving excellent aesthetic results.

### In conditions of the utmost **safety** and **convenience**

All **Xenomatrix** formats are supplied in a **double sterile blister** that assures completely aseptic handling of the matrix when it is introduced in the surgical field: the **utmost safety** combined with the **utmost convenience**.



### applicative technique

## surgical application



XC Collagen Xenomatrix

BCG-XC10





Xenomatrix is provided as two





Detach the flap all around the socket







Flap detaching, preserving the The bone graft and patch A Cross stitch, Xenomatrix being papillae



Graft the granules



a) Place one of the short extremities of patch A under the flap b) Place patch B over the graft



Place the other extremity of patch A under the flap, covering patch B



Stabilize with one or two cross stitches



Healing, seven days



Healing, three months

The surgical procedure shown has been developed by Dr. Alessandro Leonida, DDS, PhD.



XC Collagen Xenomatrix BCG-XC50



Class I or II gingival recession (according to Miller)



Identify the maximum achievable root coverage level



If necessary, cut out the matrix based on the number of dental elements involved and the width



Class I or II gingival recession (according to Miller)



The exposed root portion is accurately polished paying the utmost care not to damage the marginal tissues



Variable (split-full-split) thickness trapezoidal flap elevation



the cementoenamel junction resorbable horizontal mattress sutures sutures and interrupted sutures at the base of the anatomical papillae



Place the matrix at the level of Place the flap coronally by about Complete cover of the gingival 1 mm to the CEJ and suture recessions (CEJ). Suture the matrix with it with sling and interrupted





Positioning of the BCG-XC50 tridimensional matrix at the cementoenamel junction level (CEJ). Suturing the same to the recipient bed using resorbable stitches

of the defect to be corrected



Suturing the flap with interrupted and sling sutures. It is essential to perform a tension-free suture

### solutions





positioning

left exposed



Definitive prosthetic abutment Definitive crown





### Xenomatrix Collagen Patch

XC Collagen Xenomatrix			
2 patches:			
Patch A: 20 x 10 x 4 mm			
Patch B: Ø 14 x 4mm			



Modified coronal sliding flap; it is essential to achieve passive positioning





Healing at 4 months. Complete root coverage and an increase of the keratinized tissue thickness is observed





Xenomatrix Collagen Patch **BCG-XC50** XC Collagen Xenomatrix 1 piece, 15 x 30 x 4 mm