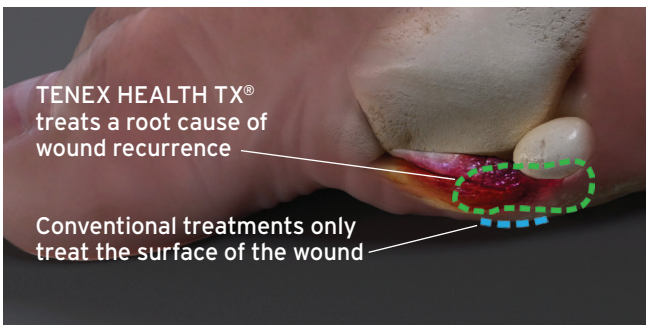


## Tenex Health TX<sup>®</sup> vs. Conventional Treatment

Unlike the repeat cleaning and debridement you may be used to, the procedure using Tenex Health TX<sup>®</sup> gets under the surface to treat diabetic foot ulcers in only one treatment.

Tenex Health TX <sup>®</sup> System	Conventional DFU Treatments
Treats the scar tissue and bony prominence below the surface of the wound	Treats the surface of the wound
Single treatment	Requires multiple office visits
Doesn't enter or expand wound Removes scar tissue while sparing healthy soft tissue	Surface cleaning and debridement may expand wound area
Skin grafts not required	Skin grafts often required
Treats the contributing factor of recurrence, the bony prominence, for a better chance of fast and lasting healing	40% - 80% infection rate for DFUs <sup>3</sup> Recurrence as high as 65% <sup>4</sup> Over 25% of patients may require amputation <sup>5</sup>
Decreases overall cost of care	Ongoing treatments increase cost of care



Ask Your Doctor How Tenex Health TX<sup>®</sup> Can Help You.  
To Learn More or Find a Doctor, Visit [helphealmydfu.com](http://helphealmydfu.com).



For more information, visit [TenexHealth.com](http://TenexHealth.com), or call 855.2TENDON.



TENEX HEALTH | Tenex Health is now a part of Trice Medical

Tenex Health, Inc. is the manufacturer of the Tenex Health TX<sup>®</sup> System.  
26902 Vista Terrace | Lake Forest, CA 92630 | 949.454.7500

The information provided in this brochure is not meant to substitute for a consultation you should have with your doctor.

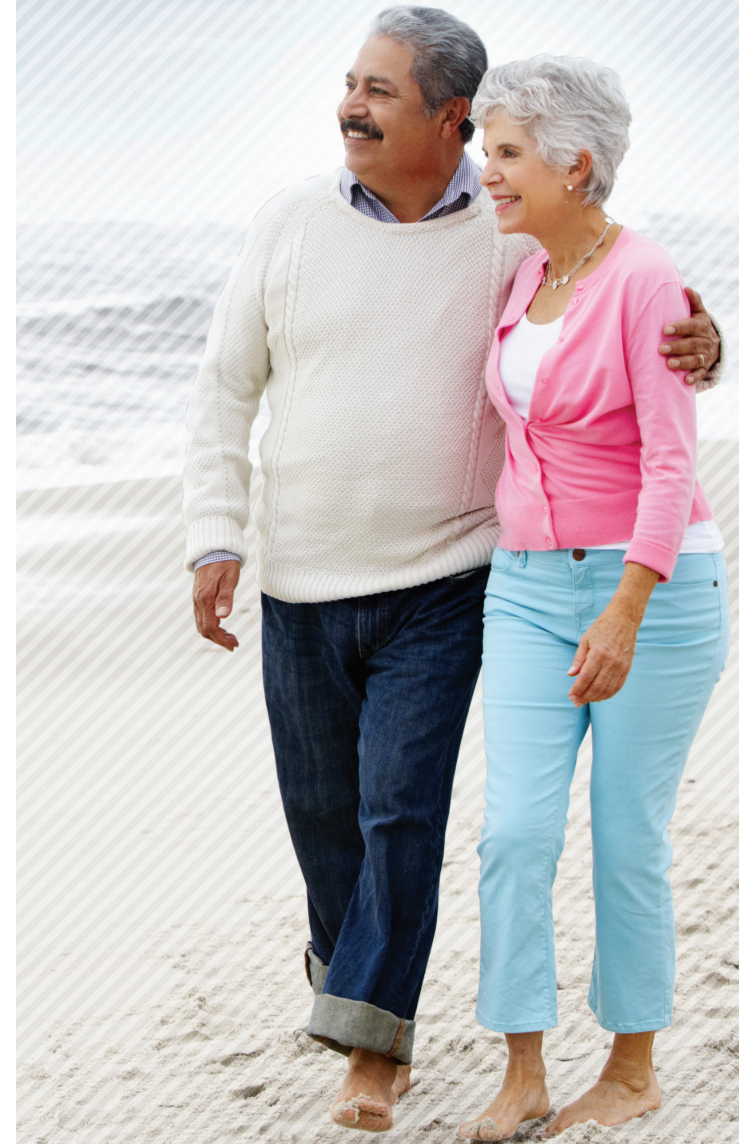
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MKT-389 REV B

## Step Forward Into Healing

Get to the Root of Your Diabetic Foot Ulcer



TENEX HEALTH | Tenex Health is now a part of Trice Medical



# Ready to Get to the Root of Your Diabetic Foot Ulcer?

Tired of re-treating your diabetic foot ulcer (DFU)? Now there's a new, minimally invasive option that requires just a single office visit.

## Treat the Bony Prominence That May Be Contributing to and Worsening Your Wounds.

Tenex Health TX<sup>®</sup> uses advanced ultrasonic energy to go under the ulcer and precisely remove scar tissue and the contributing factor of recurrence, the bony prominence. The entire outpatient procedure takes just minutes under local anesthesia, uses mini incisions, and doesn't require stitches. It's a revolutionary, single-procedure treatment option that gives you a better chance of getting back on your feet sooner – and staying there.

## Is a Procedure Using Tenex Health TX<sup>®</sup> Right for You?

It's simple. If your diabetic foot ulcer is considered chronic, you may be a good candidate for a procedure using Tenex Health TX<sup>®</sup>.

## A Single Procedure With Many Advantages

- Safe and minimally invasive
- Treats a root cause of recurrence
- Does not enter or expand the wound
- Skin grafts not required

### WHAT TO EXPECT FROM THE PROCEDURE



#### DAY OF PROCEDURE

The procedure is performed in an outpatient setting, such as an Ambulatory Surgery Center (ASC) or your doctor's office. You typically remain awake while your doctor uses local anesthesia.



#### AFTER THE PROCEDURE

Your doctor will dress the area with sterile gauze and prescribe an antibiotic.



#### POST-OP RECOVERY

Your doctor will recommend you stay off your feet and continue standard wound care management until the ulcer heals.

## Clinical Experience

Evidence shows that DFU procedures using Tenex Health TX<sup>®</sup> are precise and highly effective at removing the bony prominence that can contribute to wound recurrence. In a retrospective case study of 105 DFU patients, all of whom had prior advanced wound care, **96% were healed with a less than 5% recurrence rate and an average healing time of 3.5 weeks.**<sup>1</sup>

### Pre-Treatment

### Post-Treatment

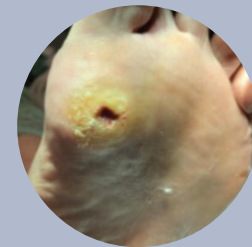
Ulcer present 2 years



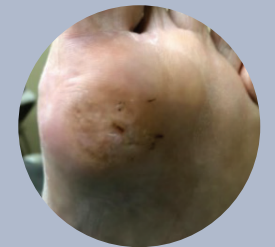
14 days after;  
No recurrence > 26 mo



Ulcer present 4 years



21 days after;  
No recurrence > 26 mo



Data from independent case review.<sup>2</sup> Individual results will vary.

#### References:

1. Freed L. Diabetes 2020 Jun;69(Supplement 1).
2. Tenex Health. MKT-392 REV A. Data on file.
3. Geraghty T, LaPorta G. Expert Rev Pharmacoecon Outcomes Res 2019.
4. Armstrong DG, et al. N Engl J Med 2017.
5. Kim S, et al. Vasc Spec Int 2018.