EXPAREL®
(bupivacaine liposome injectable suspension)

OPIOID FREE

CHOOSE EXPAREL TO MANAGE PAIN WITH FEWER OPIOIDS

EXPAREL is indicated for administration into the surgical site to produce postsurgical analgesia.

Consider EXPAREL for:

• Patients whose use of opioids may impact recovery goals
• Patients at high risk for opioid-related adverse events
• Patients at risk for misuse or abuse of opioids

Please see Indication and Important Safety Information on back cover and refer to accompanying full Prescribing Information.

For complete information related to EXPAREL, call 1-855-RX-EXPAREL (793-9727) or visit www.EXPAREL.com.
Utilize a frequent and consistent injection technique throughout the surgical site.

**BUPIVACAINE HCl IS AN AQUEOUS SOLUTION**
- Readily diffuses into surrounding tissues and spreads throughout site
- Requires fewer injections for adequate pain-receptor coverage

**EXPAREL IS A SUSPENSION COMPOSED OF MULTIVESICULAR LIPOSOMES THAT CARRY BUPIVACAINE**
- Stays precisely where placed; does *not* readily diffuse into surrounding tissue
- Requires more injections to ensure adequate pain-receptor coverage

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WHERE TO ADMINISTER EXPAREL FOR OPTIMAL ANALGESIA

WHERE

Inject deep into surgical site or into the fascial plane

SURGICAL-SITE INFILTRATION

- Inject EXPAREL slowly and deeply into soft tissues using a moving needle technique (ie, inject while withdrawing the needle)
- Infiltrate above and below the fascia and into the subcutaneous tissue
- Aspirate frequently to minimize risk of intravascular injection
- Use a 25-gauge or larger-bore needle

TAP BLOCK

- Regional field block technique for postsurgical analgesia in the abdomen
- Place EXPAREL in the fascial plane between the internal oblique and transversus abdominis muscles
- Perform using ultrasound guidance or laparoscopic visualization
HOW MUCH EXPAREL TO ADMINISTER TO ENSURE PAIN-RECEPTOR COVERAGE

DOSING CONSIDERATIONS
• Size of the surgical site
• Volume required to cover the area
• Individual patient factors that may impact the safety of an amide local anesthetic
• Maximum dose should not exceed 266 mg (20 mL single-use vials)
• Intended for single-dose administration only

DETERMINE THE RIGHT VOLUME TO COVER THE SURGICAL SITE
• Consider the size of the surgical site and the neuroanatomy
• Expand the volume to disperse liposomes throughout the surgical site
• Enough multivesicular liposomes must be available at the pain receptors to continuously release bupivacaine, ensuring long-lasting analgesia

EXPAREL 266 mg (20 mL) CAN BE EXPANDED UP TO 300 mL FOR LARGE SURGICAL SITES
• Expand with normal (0.9%) saline or lactated Ringer’s solution
• Add up to 280 mL for a total of 300 mL; a 1:14 ratio

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ENSURE EARLY ANALGESIC ACTIVITY BY ADMIXING EXPAREL WITH BUPIVACAINE HCl

Bupivacaine HCl may be administered immediately before EXPAREL or admixed in the same syringe

- Keep a 1:2 ratio of the milligram dose of bupivacaine HCl to EXPAREL. In determining the ratio, consider:
  - One 20-mL vial contains 266 mg free-base bupivacaine, which is molar equivalent to 300 mg bupivacaine HCl
  - One 30-mL vial of 0.5% bupivacaine contains 150 mg bupivacaine HCl

**Example of admixing**

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+ Up to 30 mL of 0.5% bupivacaine HCl
  150 mg total

+ Up to 60 mL of 0.25% bupivacaine HCl
  150 mg total
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• Admixing may impact the pharmacokinetic/pharmacodynamic properties of EXPAREL; the effect is concentration dependent
EXPAREL is indicated for administration into the surgical site to produce postsurgical analgesia.

**Important Safety Information**

- EXPAREL is contraindicated in obstetrical paracervical block anesthesia
- In clinical trials, the most common adverse reactions (incidence ≥10%) following EXPAREL administration were nausea, constipation, and vomiting
- EXPAREL is not recommended to be used in the following patient population: patients <18 years old and/or pregnant patients
- Because amide-type local anesthetics, such as bupivacaine, are metabolized by the liver, EXPAREL should be used cautiously in patients with hepatic disease. Patients with severe hepatic disease, because of their inability to metabolize local anesthetics normally, are at a greater risk of developing toxic plasma concentrations

**Warnings and Precautions Specific to EXPAREL**

- EXPAREL is not recommended for the following types or routes of administration: epidural, intrathecal, regional nerve blocks, or intravascular or intra-articular use
- Non-bupivacaine-based local anesthetics, including lidocaine, may cause an immediate release of bupivacaine from EXPAREL if administered together locally. The administration of EXPAREL may follow the administration of lidocaine after a delay of 20 minutes or more. Formulations of bupivacaine other than EXPAREL should not be administered within 96 hours following administration of EXPAREL

**Warnings and Precautions for Bupivacaine-Containing Products**

- **Central Nervous System (CNS) Reactions:** There have been reports of adverse neurologic reactions with the use of local anesthetics. These include persistent anesthesia and paresthesias. CNS reactions are characterized by excitation and/or depression
- **Cardiovascular System Reactions:** Toxic blood concentrations depress cardiac conductivity and excitability which may lead to dysrhythmias sometimes leading to death
- **Allergic Reactions:** Allergic-type reactions (eg, anaphylaxis and angioedema) are rare and may occur as a result of hypersensitivity to the local anesthetic or to other formulation ingredients
- **Chondrolysis:** There have been reports of chondrolysis (mostly in the shoulder joint) following intra-articular infusion of local anesthetics, which is an unapproved use

Please refer to accompanying full Prescribing Information.

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