

# TO BEGIN TREATMENT

**Inspect canister** prior to use. **Remove safety tab** on top of nozzle. **Insert clear extender tube** into nozzle. **Test spray** to ensure canister is in working order. Select appropriate **method of application**.



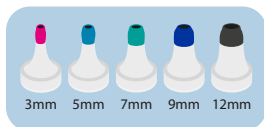
**SCAN HERE**  
FOR TRAINING VIDEO



## CryoCones®

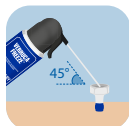
For use on fleshy areas such as stomach or back.

1. Select a CryoCone® approximately 1mm larger than the lesion.



**Tip:** 12mm cone may be inverted to treat lesions up to 25mm.

2. Place cone over lesion. Gently spray cryogen at 45° angle against inside of cone for approximately 3–6 seconds. Accumulate at least 1/8"–1/4" of cryogen into the cone.



Hold cone firmly to ensure tight seal around lesion. Keep the cone and lesion perpendicular to ground.

3. Maintain firm position of cone for 20–40 seconds while cryogen evaporates.
4. Once cryogen has completely evaporated, remove cone to reveal a concentric white ice ball on the area treated. If an ice ball does not appear, repeat treatment.
5. Allow ice ball to thaw naturally for a minimum of 40 seconds. Do not touch treated area until completely thawed.

**Freeze Time**  
20–40 seconds



**Thaw Time**  
40 seconds



### DISINFECTING CRYOCONES®

CryoCones® are reusable and must be disinfected after each use on a patient. It is also recommended to disinfect CryoCones® prior to initial use.

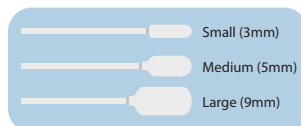
**Method 1:** Use a low-level or intermediate-level EPA-registered disinfectant, such as CaviCide™ or CaviWipes™. Ensure at least 1 minute contact time.

**Method 2:** Autoclave on default plastic setting for minimum cycle time of at least 15 minutes. Caution: This method may reduce their shelf life.

## CryoBuds®

For use on bony, thin or hard-to-reach areas, as well as head, face, neck and hands. May be preferable when treating small children.

1. Select a CryoBud® approximately 1mm larger than the lesion.



2. Choose preferred method of bud saturation:



### NON-INSERTED

Hold plastic end of bud in one hand and canister in the other hand.



### INSERTED

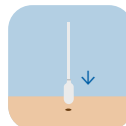
Remove clear extender tube and insert plastic end of bud into nozzle.

3. Gently spray cryogen for 3–6 seconds until drips are visible from foam.

*For non-inserted method, rotate bud during spray to ensure maximum saturation.*

4. Point bud downward for 15–20 seconds allowing bud to crystallize and reach optimal freezing temperature of -70°C.

5. Place frozen bud directly onto the lesion and hold firmly for recommended freeze time (15–40 seconds based on lesion type).



6. Remove bud to reveal a concentric white ice ball on the area treated. If an ice ball does not appear, repeat treatment.

7. Allow ice ball to thaw naturally for a minimum of 40 seconds. Do not touch treated area until completely thawed.

*CryoBuds® are not to be used on more than one patient. Dispose after treatment is complete.*

**Tip:** Medium and large CryoBuds® will hold freeze charge for 90–120 seconds allowing for treatment of multiple lesions without additional saturation. Ensure an ice ball is achieved with each treatment. If an ice ball does not appear, ignore the treatment and repeat with a fully saturated bud.

## Double Freeze-Thaw Method

After completion of first treatment, assess if a second treatment is necessary. Occasionally, large, thick or calloused lesions (especially plantar warts) may require more than one treatment per visit.

## Recommended Freeze Times

*Reduce freeze time when treating thin skin areas.*

### 15–20 SECONDS

Actinic Keratoses (Facial)  
Lentigo (Facial)

### 20–30 SECONDS

Verruca Plana (Flat Warts)  
Condyloma (Genital Warts)  
Molluscum Contagiosum

### 25–35 SECONDS

Skin Tags  
Lentigo (Non-Facial)

### 30–40 SECONDS

Verruca Vulgaris (Common Warts)  
Actinic Keratoses (Non-Facial)  
Seborrheic Keratoses

### 40 SECONDS

Verruca Plantaris (Plantar Warts)

If ever in doubt, always under-treat versus over-treat. The lesion may be re-evaluated and treated again in 1–2 weeks.

**For additional information or questions, contact CryoSurgery prior to use. Resources available at [www.verrucafreeze.com](http://www.verrucafreeze.com).**

## Indications for Use

Treatment of benign lesions, including:

- Verruca (warts)–flat, filiform, vulgaris, plantar, mosaic, genital
- Lentigo (age spots)
- Actinic Keratoses (solar keratoses)
- Seborrheic Keratoses
- Acrochordon (skin tags)
- Molluscum Contagiosum
- Small Keloids
- Dermatofibromas
- Keratoacanthoma
- Granuloma Annulare
- Angiomas
- Chondrodermatitis
- Epithelial Nevus
- Porokeratosis Plantaris
- Leukoplakia
- Granuloma Pyogenicum
- Pyogenic Granuloma

FOR USE BY LICENSED MEDICAL  
PROFESSIONALS ONLY

## Treatment Tips

Instruct patient not to move during procedure. As with all cryosurgery, an initial sting or burning sensation may be felt briefly. Pre-treatment use of topical anesthetic cream is advisable in sensitive or overly anxious patients.

Thick and calloused lesions, such as plantar warts, may be debrided before treatment. Do not debride to the point of bleeding.

When treating areas with extreme blood flow, the Ballooning Technique can be used to increase effectiveness. Prior to treatment, “balloon” area with lidocaine (and epinephrine if high circulation) to raise lesion, constrict surrounding blood vessels, and reduce heat to lesion. The prolonged thaw time increases the odds of permanently destroying the entire wart virus. This technique should be reserved for physicians who are experienced in cryosurgery.

Application of salicylic acid after treatment or at home is not required but may increase efficacy. Type of salicylic acid, dosage and frequency should be determined by physician.

Always tell patient what to expect and how to care for lesion(s) post-treatment. The aftercare is just as important as the treatment itself.

## Contraindications

Verruca-Freeze® should be used only on benign, superficial skin lesions. Do not treat lesion if cancer is suspected. If there is doubt that a lesion is benign, it should first be biopsied.

If lesions persist post-treatment, reinspect and confirm that lesions are not cancerous.

Not recommended for those with diabetes and others with poor circulation, as healing time is considerably slower.

Do not use on irritated or infected skin. Do not use on bleeding, open or breached lesions. Do not use on mucus membrane areas.

Safety in pregnancy has not been established.

## Warnings

Inspect all product components prior to use. If any part is damaged in any way, do not use.

Read all instructions and practice techniques prior to use on patients.

Never attempt to open spray cryogen onto a lesion as this could result in damage of surrounding healthy tissue.

Avoid spraying on or near eyes or other sensitive body areas. Use eye shields and ear plugs as appropriate when treating head or neck area.

If canister becomes overpressurized due to heat or other factors, a safety mechanism on canister bottom will release. If this occurs, promptly move canister away from people and allow contents to discharge in a safe area.

Use only in well-ventilated areas.

## Potential Complications

As with any procedure, complications can occur. Potential complications may include:

**Acute:** headache, pain, and blister formation

**Delayed:** hemorrhage, infection, and excessive granulation tissue formation

**Prolonged-temporary:** milia, nerve damage, and hyperpigmentation

**Permanent:** alopecia, atrophy, scarring, hypopigmentation, and ectropion formation



# INSTRUCTION MANUAL

Save these instructions  
for future reference

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