



## **PRE-PROCEDURE INSTRUCTIONS FOR PRP THERAPY**

### **About Platelet-Rich Plasma (PRP)**

- PRP therapy begins with collection of 10-20 milliliters of your blood. The blood sample is placed in a centrifuge to separate the platelet-rich plasma from the other components of whole blood. Your physician then injects the concentrated platelets into the site of the injury
- Our blood is made up of 93% red blood cells, 6% white blood cells, 1% platelets and plasma. Platelets are best known for their function of blood-clotting to stop bleeding. Platelets, however, are much more significant than this, as human platelets are also a critical component in injury healing. Platelets are naturally extremely rich in the connective tissue growth and healing factors. The body's first response to tissue injury is to deliver platelets to the area. Platelets initiate repair and attract stem cells to the injury. Injecting these growth factors into damaged ligaments, tendons, and joints stimulates the natural repair process. In order to maximize the healing process, the platelets must be concentrated and separated from the red blood cells. The goal of PRP is to maximize the number of platelets while minimizing the number of red blood cells in a solution that is injected into the injured or pained area(s).
- You will feel a notable increase in pain in the days immediately following the injection. Pain intensity becomes less each day as functional mobility and general functional ability increase along with endurance and strength. You will notice gradual improvement 2-6 weeks after PRP therapy. Some patients report ongoing improvement 6-9 months after PRP therapy is administered. In some studies, Ultrasound and MRI images have shown tissue repair has occurred after PRP therapy, supporting the proof of the healing process. By treating injured tissues before the damage progresses, surgical intervention may be avoided.

### **Pre Procedure Instruction**

- If you are taking “**blood thinning**” medications, we must have a letter from the prescribing physician giving permission for you to stop the medication for the appropriate time period. Do not stop your medication until you have discussed this with your prescribing doctor and have written permission.

#### **Injectable Medications:**

- Aggrastat (tirofiban) Stop **8 HOURS prior** to procedure
- Angiomax (bivalirudin) Stop **14 days prior** to the procedure
- Arixtra (fondaparinux) Stop **7 days prior** to procedure
- Heparin Stop **24 hours prior** to procedure
- Integrilin (eptifibatide) Stop **8 HOURS prior** to procedure
- Iprivask (desirudin) Stop **14 days prior** to procedure
- Lovenox Stop **24 hours prior** to procedure
- Novastan (argatroban) Stop **14 days prior** to procedure
- Orgaran (danaparoid) Stop **7 days prior** to procedure
- Refludan (lepirudin) Stop **14 days prior** to procedure
- ReoPro (abciximan) Stop **2 days prior** to procedure

#### **Medications Taken by mouth:**

- Aspirin or aspirin containing medications (such as Excedrin) Stop **7 days prior** to procedure
- Brilinta (ticagrelor) Stop **5 days prior** to procedure
- Coumadin (warfarin) Stop **5 days prior** to procedure
- Dicumerol/dicumarol Stop **5 days prior** to procedure
- Effient (prasugrel) Stop **7 days prior** to procedure
- Eliquis (apixaban) Stop **3 days prior** to procedure

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- Elmiron Stop **5 days prior** to procedure
  - Exanta (elagatran/ximelagatran) Stop **14 days prior** to procedure
  - NSAIDs (Ibuprofen, Naproxen, Diclofenac, Aleve, Mortin, Advil, Mobic, Duexis, Zorvolex, Zipsor, Vivlodex, Meloxicam, Voltaren, Arthrotec, Relafen, Indocin, Celebrex or similar anti-inflammatory medications etc.) Stop **5 days prior** to procedure
  - Persantine (dipyridmole) Stop **7 days prior** to procedure
  - Plavix (clopidogrel) Stop **7 days prior** to procedure
  - Pletal (cilostazol) Stop **7 days prior** to procedure
  - Pradaxa (dabigatran) Stop **2 days prior** to procedure
  - Xarelto (rivaroxaban) Stop **2 days prior** to procedure
  - Ticlid (ticlopidine) Stop **14 days prior** to procedure
  - Vitamin E Stop **3 days prior** to procedure
- Do NOT take NSAIDs (Ibuprofen, Naproxen, Diclofenac, Aleve, Mortin, Advil, Mobic, Duexis, Zorvolex, Zipsor, Vivlodex, Meloxicam, Voltaren, Arthrotec, Relafen, Indocin, Celebrex or similar anti-inflammatory medications etc.) **5 days prior** to your procedure (Acetaminophen = Tylenol is acceptable)
  - Do NOT take Vitamin E, Fish oil, Garlic, Ginki, Ginseng **5 days prior** to the procedure
  - **Continue to take** your blood pressure pills, seizure medications, asthma medications, thyroid medication, pain medications as prescribed/scheduled
  - You might require pre-procedure blood work or diagnostic tests such as X rays, CT scan, MRI and/or EMG studies
  - If you are allergic to **LATEX**, please tell the physician immediately.
  - If you are allergic to **SHELL-FISH, IODINE CONTRAST, IVP dye or CT scan contrast**, please tell the physician.
  - Please arrive **30 minutes before** your appointment time. This allows us time to complete the necessary paperwork and assessments prior to the procedure. Wear loose fitting clothing the day of your procedure
  - Do not apply powder or cream over the area where the procedure is to be performed
  - For more information, visit our website [www.relievus.com](http://www.relievus.com) or call the office at **(888) 985-2727**

### Female Patients

- If you are pregnant or trying to get pregnant, you **MUST** inform us immediately.
- **Urine pregnancy test** will be done prior to the procedure at the facility.

The above instruction was given to me and/or my guardian(s) **at least 72 hours prior to the procedure**. I have read or had read to me the above information including the surgical consent. I have followed the above instruction.

Patient or Legal Guardian's Name: \_\_\_\_\_

Patient's signature: \_\_\_\_\_

Date: \_\_\_\_\_