



## **PRP PATIENT INSTRUCTION SHEET**

### **ABOUT PRP**

Sometimes the body fails to heal a tendon or joint injury, leading to chronic impairment of the injured tissue. Platelet Rich Plasma or PRP is the injection of your own blood. We know that platelet activation plays a key role in the process of wound and soft tissue healing. PRP contains many healing properties that can repair damaged tissue.

Preparing for the procedure

#### **How PRPs are done**

PRP is derived from a sample of your own blood and is composed of highly concentrated platelets and growth factors. The PRP is then injected into the injured area or joint. After a blood sample is obtained from a vein, the blood is put into a centrifuge that separates the blood into its many components. Using a specially designed syringe the PRP is then injected into the affected area. In most cases, ultrasound guidance is used to assist in the precise placement of the PRP.

#### **How to prepare for your PRP procedure**

PRP is a safe procedure with few and generally minimal side effects. If you have any questions about your diagnosis and treatment plan discuss them with the physician before your procedure. You will need to stop taking any anti-inflammatory medications such as Motrin, Naprosyn, Advil, Aleve, Celebrex, etc. If you are taking a baby aspirin for heart protection you may continue to do this until your procedure. The night before and the morning of your procedure, scrub the area to be treated with anti-bacterial soap. **If you have** any anxiety issues regarding your procedure, please call the office at least 2 days before your procedure for an oral sedative prescription. If you take an oral sedative, a driver is required to take you to/from your procedure.

If you are currently on Coumadin, Plavix, Lovinox, Proxoa or another blood thinner we ask you to see your PCP/ or whoever is prescribing the blood thinner and receive their permission to discontinue this medication for 3 days prior to treatment and resume the evening after treatment. Bleeding is a risk of the procedure and it is important to minimize this risk.

Alert the staff if you have an allergy to anesthetics, bandages or skin preparation solution. Be sure to drink plenty of water the day before and the day of your procedure. Better hydration makes the blood draw easier. If there is a reliable place to draw your blood, inform the staff.

After the procedure, there will be a dressing or band aid over the injection site. Do not immerse yourself (swim, soak in a tub) in water for 24 hours after the procedure. You may shower the night of your procedure or the following morning. You may experience pain in the area of the procedure for the first few days (up to a week) after the procedure. This is normal and is part of the healing process. You will need to limit weight bearing and motion (for upper limb procedures) for the first week after the procedure and may not do any exercise for a minimum of 2 weeks after the procedure. If you have a procedure done to the achilles or in the foot/ankle area then you will wear a cast-boot for 2-3 weeks after the procedure.