



PRP Treatment Frequently Asked Questions

What is platelet-rich plasma (PRP) Therapy?

PRP therapy involves taking the patient's own blood and placing it in a machine called a centrifuge which separates the blood into several components, one of which is called platelet-rich plasma. Platelets contain many growth factors which have been shown to be very important with regard to healing. The process of centrifuging concentrates these platelets so that they are present in much higher numbers than what would typically be found in the bloodstream.

That platelet-rich plasma is then injected at the site of the injury to induce and potentially accelerate the body's natural healing process.

Is PRP New?

The technology has been used for years in surgical applications and wound care. The use of PRP for musculoskeletal injuries is fairly new and evolving into a promising treatment for both acute and chronic injuries. There are a number of medical studies supporting the use of PRP for tendon and ligament injuries.

Do I have to worry about the use of blood products?

The patient's own blood is used for the procedure so there are no transfusion risks or blood borne infection from a donor.

How long does it take?

Generally a PRP injection requires an initial visit to see if the injury would benefit from such treatment, then a follow-up visit for the treatment itself is scheduled. The actual injection process takes about 30 minutes and a majority of that time involves drawing and processing the patient's blood for the injection.

What conditions can be treated with PRP?

Many research studies have been performed, and many more are ongoing, which look at the effectiveness of PRP treatment. The most promising results to date have been with soft tissue injuries, including tendonitis, tendon tears, ligament sprains or tears, loose ligaments, and muscle tears. PRP has also been effective in treating cartilage degeneration such as arthritis.

What are some common diagnoses treated with PRP?

Shoulder: Rotator cuff tendinitis or tear, rotator cuff impingement syndrome or bursitis, bicipital tendinitis, labrum tear, arthritis, instability

Elbow/wrist/hand: Tennis elbow, golfer's elbow, DeQuervain's Tenosynovitis, trigger finger, arthritis, other wrist and finger tendinitis

Knee: Patellar tendinitis, partially torn or strained major ligaments of knee (ACL/LCL/MCL), meniscus tears, chondromalacia, arthritis, instability

Ankle: Achilles tendinitis, peroneal tendinitis, ankle sprain, instability, other foot or ankle tendinitis



Platelet-Rich Plasma Treatment (PRP)

General Instructions:

- No anti-inflammatories (NSAIDs) for 2 weeks **before** and 2 weeks **after** the injection
- Plan to have someone drive you home if you've had a lower extremity injection
- Dr. Reed will evaluate on a case-by-case basis whether aspirin taken for other issues (cardiac, vascular, etc...) should be stopped or continued around the time of the injection
- Dr. Reed will prescribe a pain medication at the time of the injection
- Injection site pain is usually worst 2-3 days after the injection
- Infection is very uncommon, but look for fever, chills, increased redness and drainage at the injection or venipuncture site
- It's normal to feel worse or no better for up to four weeks

What to Expect:

- After arriving a medical assistant will ask you a few questions regarding your medical history, they will also do some simple tests such as take your blood pressure
- Please inform the medical assistant and or/physician of any allergies you may have before your exam
- Dr. Reed will discuss the therapy in detail with you and answer any questions you may have
- The procedure takes approximately 30 minutes

After care following PRP Injection:

- It is suggested to go home and not go back to work or run errands the same day
- Ice should be applied to the area of injection for about 20 minutes, 3 times a day for the next 48 hours
- DO NOT TAKE anti-inflammatory medications for the next two weeks
- Dr. Reed will prescribe a pain medication at the time of the injection
- Pain in the injection site is normal and to be expected
- Avoid vigorous or strenuous activities for the first two weeks, then as tolerated
- Upper extremity (shoulder/elbow): A sling should be worn for 2 weeks, then physical therapy should start
- Knee (joint/patellar tendon): A Redi brace should be worn for 2 weeks, crutches as needed, then physical therapy should start
- Foot/Ankle (joint/Achilles and other tendons/planter fascia): A cam walker boot should be worn for 2 weeks, crutches as needed then physical therapy should start



PRP Treatment Disclosure and Consent Form

Patient Name: _____

Date: _____

Physician Name: _____

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That platelet-rich plasma is then injected at the site of the injury to induce and potentially accelerate the body's natural healing process.

What types of conditions are treated?

Based on current research, soft tissue injuries are the most responsive to PRP. This includes tendonitis, tendon tears, ligament sprains or tears, loose ligaments or muscle tears. PRP has also been effective in treating cartilage degeneration such as arthritis.

What does the treatment entail?

- Blood sample from the patient is taken, which is placed in the centrifuge to separate the plasma rich with platelets
- PRP is collected into a sterile syringe
- The injection is administered into the site with or without the aid of ultrasound/x-ray fluoroscopy

Risks, Complications, and Side Effects:

As with any medical procedure, there are always associated risks; however, this procedure is likely to provide you with the proper healing of an injury and pain relief that you might not otherwise receive.

- Achiness or soreness at the injection site—which initially increases and can last several days, but gradually decreases with time
- Allergy to any of the substances utilized during the procedure, such as anesthetic, antiseptic, or dressing. This is usually minor and self-limiting
- Local bruising
- Infection—rare. Most infections will present after the 48 hour mark. Look for fever, chills, increased redness and drainage at the injection or venipuncture site

Your physician has recommended the above proposed treatment. At this time, this treatment is not usually covered by insurance/Medicare.

Please note that payment for the procedure or services is required at the time of service (PRP requires prepayment before the procedure is scheduled).

My treating physician has proposed that I receive the above-listed treatment.

For PRP: ____ (patient initials). I acknowledge that my physician has informed me that use of this treatment for the condition that I have is not approved by the FDA (Food and Drug Administration). As a result, I understand that the medical community may not yet be fully aware of the potential benefits/risks associated with this treatment for my condition, but my treating physician feels that this treatment is medically appropriate and that the benefits outweigh the potential risk. My signature below indicates that this treatment has been explained to me by my treating physician to my satisfaction. Furthermore, I acknowledge that I have an understanding of the treatment being proposed and its potential benefits/risk, and all of my questions regarding this treatment have been answered to my satisfaction.

Patient Signature: _____

Date: _____

Wallingford Office
2409 North 45th Street
Seattle, WA 98103
Phone (206) 633-8100 Fax (206) 633-6107

Ballard Office
5350 Tallman Ave. NW, Suite 500
Seattle, WA 98107
Phone (206) 784-8833 Fax (206) 784-0676