



Dear Patient:

You have been scheduled for a Platelet Rich Plasma (PRP) injection or Autologous Blood Injection under ultrasound guidance to be performed in the Department of Radiology and Imaging at Hospital for Special Surgery.

Most health insurance plans consider this treatment experimental or investigational and therefore do not cover PRP therapy and PRP (autologous blood) related therapies. Because the health insurance plans below have notified us that these therapies are not covered, we can not bill these health insurance plans for this service.

- **The attached *Advance Notice of Non-Coverage* form must be signed by all patients undergoing these procedures and full payment must be made prior to treatment.** If your health insurance plan is not listed below you may select any Option. If your health plan is listed below you may select only Option 2 or Option 3.

**Health insurance plans with confirmed non-coverage policies on PRP and PRP related therapies:**

- AETNA
- BLUE CROSS BLUE SHIELD
- CIGNA HEALTH PLANS
- HEALTH NET
- OXFORD HEALTH PLANS
- UNITED HEALTHCARE

Please read the *Notice* as well as the attached *Patient Instructions* thoroughly so you understand your Options. Questions regarding these procedures can be directed to the Radiology Nurse at (212) 774-7111.

If you do not wish to continue with this procedure, please inform our scheduling office at (212) 774-2052 and please discuss alternate treatment options with your physician overseeing your care.

Thank you for choosing the Department of Radiology and Imaging at the Hospital for Special Surgery for your musculoskeletal care and the physicians of the HSS *Radiologists*.

Thank you







**PATIENT INSTRUCTIONS**  
**ULTRA-SOUND GUIDED:**

- **PLATELET RICH PLASMA (PRP) INJECTION**
- **AUTOLOGOUS BLOOD INJECTION**

Your physician has sent you for an image-guided injection. It is either for PRP or Autologous Blood injection. The following are answers to frequently asked questions.

### **WHAT IS PLATELET-RICH PLASMA?**

Platelet Rich-Plasma (PRP) is blood plasma with concentrated platelets. The concentrated platelets in PRP contain huge reservoir of bioactive proteins, including growth factors that are important to tissue regeneration and repair.

### **HOW DOES PRP DIFFER FROM AUTOLOGOUS BLOOD INJECTION?**

The principle behind both autologous blood injection and PRP injection is similar.

The difference between the two is that autologous blood uses all the blood components while PRP uses only a concentration of platelets.

### **HOW DOES PRP WORK?**

After consent is obtained for the procedure, a small amount of blood is taken from the patient and placed in a centrifuge. The centrifuge spins the blood and the platelet rich plasma (PRP) is separated. The PRP is injected under sterile condition to prevent infection and under Ultrasound guidance by an experienced radiologist to precisely localize the site of the tendon/soft tissue abnormality.

### **WHAT ARE THE POTENTIAL BENEFITS OF TREATMENT?**

Patients report improvement in symptoms and return of function, but it takes time; six to eight weeks. This procedure may eliminate the need for more invasive treatments, such as surgery or prolonged use of medication.

### **WHAT CAN I EXPECT IMMEDIATELY FOLLOWING THE PROCEDURE? ANY PAIN RELIEF?**

The anesthetic utilized to numb the skin generally wears off in 1-2 hours. Mild pain and swelling may occur at the injection site at this time.

Bleeding at the site of the injection can occur, but usually subsides within a short period of time. If a Band-Aid has been placed over the site, it may be removed within 2-3 hours following the procedure. Shower is allowed.



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If you feel severe pain at injection site following the PRP or Autologous blood injection, please inform the radiology staff of the situation prior to leaving the department, so you can be evaluated and accommodations can be made so you are able to leave the hospital safely.

**WHAT CAN I DO? WHAT SHOULD I NOT DO?**

While the long-acting anesthetic agent is working, the area injected will be numb. You must be particularly careful not to traumatize the area during this time.

**THE FOLLOWING POSTPROCEDURE INSTRUCTIONS IS ADVISED:**

1. Minimize activity for 24 hours after the procedure.
2. Your diet can be the same as usual.
3. Do not take any non-steroidal anti-inflammatory medications (NSAIDs) for 2 weeks following the procedure. An alternative pain medication will be prescribed.
4. Ice compress may be applied to the area as needed; 15 minutes every hour if there is pain.

**NOTE: IF YOUR REFERRING PHYSICIAN ADVISES YOU DIFFERENTLY, PLEASE FOLLOW HIS/HER INSTRUCTIONS.**

**WHAT ARE THE POSSIBLE COMPLICATIONS?**

***Infection***

Infection is a rare, but serious complication of any injection. It can take several days to develop, resulting in pain, swelling and redness at the site as well as fever and chills. If you experience these symptoms immediately contact us or your referring physician.

***Bleeding***

Rarely, patients may experience continued bleeding at the site. The application of direct pressure will result in cessation of most bleeding. Uncontrollable deep or superficial bleeding should be reported.

***Tendon or Ligament Rupture***

This is less likely to occur with a targeted injection under image guidance



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Ultrasound can document the pathology prior to the injection and accurately identify the site for the injection.

Location of the Autologous Blood or PRP as well as promoting the distribution of the injected material during real time observation (**US**), is accurate if performed by an experienced radiologist to minimize **possible negative outcomes such as:**

- Injecting the PRP at the site of neurovascular structures, such as the sciatic nerve at the hamstring tendon origin.
- Tendon Rupture.

**If you have any questions regarding this procedure, please call:**

**Radiology Nurse**

**Monday – Friday, 8:00am to 5:00pm  
212.774.7111**

**Radiology Fellow “On  
Call”**

**Monday- Friday – 5:00pm to 8:00am  
Weekends & Holidays – 24 hours  
212.606.1188 and ask for the Radiology Fellow “On Call”**

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