

PRP-Post Procedure Guidelines

What to expect after a PRP injection:

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- Once the local anesthetic wears off, the area surrounding the injection site will likely be throbbing and aching. Remember, the theory behind platelet-rich plasma injections is using platelets to trick your body into thinking you just injured yourself, therefore triggering a regenerative response from your body. This will hopefully replace chronic inflammation with a short period of acute inflammation and will also stabilize the tissues in the affected area.
- The area may be aching and throbbing for at least 24 hours, and this could last for up to one week.
- If the pain is causing you trouble sleeping, you can use Tylenol or your prescribed pain medication (See Medication Guidelines below).
- It is common and expected to also feel an achy and stiff sensation of fullness at the injection site that may last for several days. The fullness is due to the platelet gel forming a matrix that takes up space within the tissue.
- In the weeks following the injection we typically hear that people have good and bad days. Remember, this is not a steroid injection, which tends to show a rapid effect. Most of our patients see the most benefit approximately 4-6 weeks post injection. We ask that you contact our office at the 4 week mark in order to schedule a follow up of your progress, if a follow up appointment has not already been scheduled.

Medication Guidelines:

- For a minimum of two weeks post-injection, it is important for the efficacy of the treatment that all anti-inflammatory medications (NSAIDs) are discontinued. Tylenol (Acetaminophen) and Celebrex are also **OK** to take, but we ask that you avoid other NSAIDs such as Aspirin, Naproxen (Aleve) and Ibuprofen (Advil, Motrin) because they will inhibit platelet function. Other prescription pain medications prescribed by Dr. McLaughlin are also OK to take. If you have any questions regarding medications not listed please contact Dr. McLaughlin's office.

Activity Guidelines:

- For the first two weeks, we encourage you to resume normal day-to-day activities and light exercise such as spinning a stationary bike with little resistance. Controlled and moderate movement is important for the proper stimulation of tissues to rebuild in a linear and physiologic fashion. However, we strongly advise that you avoid heavy lifting or high exercise levels because these activities will compromise the progress we are trying to make.
- After two weeks, you are cleared by Dr. McLaughlin to resume exercising the area. However, we ask that you gradually increase the intensity of your workouts so as not to re-injure the tissue. Use pain in the area of injection as a guide to how far you push yourself. This is not like physical therapy after surgery; we do not want you to push through the pain. Instead, ease off the intensity if the pain persists.

Additional injections:

- Depending upon how the tissue reacts to the initial PRP injection, Dr. McLaughlin will determine on a case-by-case basis if additional injections are necessary. Dr. McLaughlin prefers to see some improvement from the initial injection to be sure the tissue is responding before we proceed with discussions of a second injection. Your treatment plan will be discussed in detail following your initial injection. In both acute and chronic injuries, injections may be combined with a physical therapy program to maximize the success of the treatment.

Questions/Complications:

- We have yet to experience complications, but if you feel any of the following symptoms immediately contact our office (970)382-8292.
 - Prolonged redness, swelling, fevers, chills, muscle weakness as well as numbness and/or tingling.

****NSAIDs must be discontinued one week to five days prior to the procedure.****