



Regenexx SD Bone Marrow Concentrate Procedure Guide

Please review this guide for important information about your Regenexx Procedure

PROCEDURE PREPARATION AND MEDICATION RESTRICTIONS

Based on over a decade of research Regenexx has learned that the following medications have been shown to be particular problems in our clinical experience or are suspected to be issues based on what is published in the medical research about their impacts on cells.

DO NOT DISCONTINUE ANY MEDICATION WITHOUT SPEAKING WITH THE PRESCRIBING PHYSICIAN

Please note: Your Regenexx Physician will provide the timeline to discontinue these medications for your specific case. If you did not discuss these medications at your evaluation, please contact your Care Coordinator to see if any adjustments need to be made to the timing of your scheduled procedure.

INHALED STEROIDS for asthma: Advair, beclomethasone, budesonide, Flovent, fluticasone, mometasone, Nasonex, Pulmicort, QVAR, etc.

STEROID INJECTIONS like those given for knee or joint arthritis or sciatica.

ORAL STEROIDS like Prednisone, methylprednisolone, etc.

TOPICAL STEROID CREAMS AND EYE DROPS

NSAID DRUGS like Aspirin, Meloxicam, Motrin, Ibuprofen, Aleve, Naprosyn, Celebrex, Voltaren, Cataflam, and others. If you think you will have intolerable pain with stopping these drugs, then please let us know. We can often substitute high-dose fish oils or the Regenexx Advanced Stem Cell Support Formula Supplement for these drugs. In fact, one of the ingredients in the New Regeneration supplement(Curcumin) was recently shown to be as effective as Ibuprofen for reducing pain and stiffness.

STATIN CHOLESTEROL LOWERING DRUGS like Crestor, Lipitor, Mevacor, Pravachol, Vytorin, Zocor, and others. If you have a history of heart disease, you must clear stopping these drugs temporarily with your prescribing cardiologist or internist.

ACE/ARE BLOOD PRESSURE DRUGS like Lisinopril, Enalapril, Altace, Accupril, Prinivil, etc. If you're on these drugs, consult with your Regenexx Doctor and/ or prescribing doctor about switching to a different blood pressure drug.

TESTOSTERONE INHIBITORS like Proscar or Propecia. If you're on these drugs, consult with your Regenexx Doctor and/or prescribing doctor about stopping for a while.

BLOOD THINNERS like Xarelto, Coumadin, Eliquis, Apixaban, Rivaroxaban, Warfarin. These medications should be discontinued for a time period that is recommended by your Regenexx Physician and approved by the Prescribing Physician.

PROCEDURE PREPARATION AND MEDICATION RESTRICTIONS

IQINOLONE ANTIBIOTICS like Floxin, Noroxin, Cipro, Levaquin, etc. These have been associated with tendon ruptures, so consider speaking with your doctor about alternative antibiotics.

PROTON PUMP INHIBITORS like Aciphex, Nexium, Prevacid, Prilosec, Protonix, should be discontinued unless you have Barrett's Esophagus, in this case, please remain on your medication. **Suitable alternatives** are Axid, Zantac(ranitidine), Pepcid (famotidine), Tagamet, Tazac, or Zantac.

OTHER MEDICATION TO AVOID Avandia (Rosiglitazone Anti-Diabetic Medication), Pepto Bismol (Contains Salicylates), Interferon (immune suppressant), Chemotherapy drugs, Erythropietin (EPO), Human Chorionic Gonadotropin (HCG), Marijuana.

EXPECTIONS TO MEDICATION CHANGES

MALE OR FEMALE HORMONE REPLACEMENT including thyroid hormones, estrogen, progesterone, testosterone, and growth hormone like Norditropin. You should stay on your hormone therapy and just avoid adrupt changes within 1-2 weeks before or after the procedure.

THYROID MEDICATION You may continue to take thyroid medication.

We recommend refraining from blood donation for 2 months prior to and 2 months post-procedure.



If you are taking any of the medications on the restricted list and did not discuss them with your Regenexx Physician it is important that you contact us prior to your scheduled procedure.

Talk to your Regenexx at New Regeneration Orthopedics of Florida Physician about how to treat your pain. Create a safe and effective treatment plan that is right for you.

Alternatives to Opioids: Medications

If advised by your Regenexx at New Regeneration Orthopedics Physician in your Patient Plan during your consultation.

ADVANTAGES:

- Can control and alleviate mild to moderate pain with few side effects.
- Can reduce exposure to opioids and dependency.

DISADVANTAGES:

- May not be covered by insurance.
- May not be effective for severe pain.

**Florida
HEALTH**

NON-OPIOID MEDICATIONS	DESCRIPTIONS, ADDITIONAL ADVANTAGES & DISADVANTAGES
<p>Acetaminophen (Tylenol)</p>	<p>Relieves mild-moderate pain, and treats headache, muscle aches, arthritis, backache, toothaches, colds and fevers. <i>Overdoses can cause liver damage.</i></p>
<p>Non-steroidal Anti-inflammatory Drugs (NSAIDs): Aspirin, Ibuprofen (Advil, Motrin), Naproxen (Aleve, Naprosyn)</p>	<p>Relieve mild-moderate pain, and reduce swelling and inflammation. <i>Risk of stomach problems increases for people who take NSAIDs regularly. Can increase risk of bleeding.</i></p>
<p>Nerve Pain Medications: Gabapentin (Neuraptine), Pregabalin (Lyrica)</p>	<p>Relieve mild-moderate nerve pain (shooting and burning pain). <i>Can cause drowsiness, dizziness, loss of coordination, tiredness and blurred vision.</i></p>
<p>Antidepressants: Effexor XR, Cymbalta, Savella</p>	<p>Relieve mild-moderate chronic pain, nerve pain (shooting and burning pain) and headaches. <i>Depending on medication, side effects can include: drowsiness, dizziness, tiredness, constipation, weight loss or gain.</i></p>
<p>Medicated Creams, Foams, Gels, Lotions, Ointments, Sprays and Patches: Anesthetics (Lidocaine), NSAIDs, Muscle Relaxers, Capsaicin, Compound Topicals</p>	<p>Can be safer to relieve mild-moderate pain because medication is applied where the pain is. Anesthetics relieve nerve pain (shooting and burning pain) by numbing an area; NSAIDs relieve the pain of osteoarthritis, sprains, strains and overuse injuries; muscle relaxers reduce pain by causing muscles to become less tense or stiff; and capsaicin relieves musculoskeletal and neuropathic pain. Compounded topicals prepared by a pharmacist can be customized to meet a patient's specific needs. <i>Skin irritation is the most common side effect. Capsaicin can cause warmth, stinging or burning on the skin.</i></p>
<p>Interventional Pain Management</p>	<p>Includes anesthetic or steroid injections around nerves, tendons, joints or muscles; spinal cord stimulation; drug delivery systems; or permanent or temporary nerve blocks. Medicates specific areas of the body. Can provide short-term and long-term relief from pain. <i>Certain medical conditions and allergies can cause complications.</i></p>
<p>Non-opioid Anesthesia</p>	<p>Opioids can be replaced with safer medications that block pain during and after surgery. A health care provider or an anesthesiologist can provide options and discuss side effects.</p>

Alternatives to Opioids: Therapies

ADVANTAGES:

- Can control and alleviate mild to moderate pain with few side effects.
- Can reduce exposure to opioids and dependency.
- Treatment targets the area of pain—not systemic.
- Providers are licensed and regulated by the State of Florida.* (apps.mqa.doh.state.fl.us/MQAsearchServices)

DISADVANTAGES:

- May not be covered by insurance.
- Relief from pain may not be immediate.
- May not be effective for severe pain.

Sources: American College of Surgeons, Centers for Disease Control and Prevention, National Institutes of Health, the Food and Drug Administration, Harvard Health and Wexner Medical Center (Ohio State University)

THERAPIES	DESCRIPTIONS, ADDITIONAL ADVANTAGES & DISADVANTAGES
<p>Self-care</p>	<p>Cold and heat: Ice relieves pain and reduces inflammation and swelling of intense injuries; heat reduces muscle pain and stiffness. Can provide short-term and long-term relief from pain. <i>Too much heat can increase swelling and inflammation.</i></p> <p>Exercise and movement: Regular exercise and physical activity can relieve pain. Simply walking has benefits. Mind-body practices like yoga and tai chi incorporate breath control, meditation and movements to stretch and strengthen muscles. <i>Maintaining daily exercise and overcoming barriers to exercise can be a challenge.</i></p>
<p>Complementary Therapies</p>	<p>Acupuncture: Acupuncturists* insert thin needles into the body to stimulate specific points to relieve pain and promote healing. Can help ease some types of chronic pain: low-back, neck and knee pain, and osteoarthritis pain. Can reduce the frequency of tension headaches. <i>Bleeding, bruising and soreness may occur at insertion sites.</i></p> <p>Chiropractic: Chiropractic physicians* practice a hands-on approach to treat pain including manual, mechanical, electrical and natural methods, and nutrition guidance. Can help with pain management and improve general health. <i>Aching or soreness in the spinal joints or muscles sometimes happens—usually within the first few hours after treatment.</i></p> <p>Osteopathic Manipulative Treatment (OMT): Osteopathic physicians* use OMT—a hands-on technique applied to muscles, joints and other tissues—to treat pain. Clinically-proven to relieve low-back pain. <i>Soreness or stiffness in the first few days after treatment is possible.</i></p> <p>Massage therapy: Massage therapists* manually manipulate muscle, connective tissue, tendons and ligaments. Can relieve pain by relaxing painful muscles, tendons and joints. Can relieve stress and anxiety—possibly slowing pain messages to and from the brain. <i>At certain points during a massage, there may be some discomfort—especially during deep tissue massage.</i></p> <p>Transcutaneous electrical nerve stimulation (TENS): TENS is the application of electrical current through electrodes placed on the skin with varying frequencies. Studies have shown that TENS is effective for a variety of painful conditions. The intensity of TENS is described as a strong but comfortable sensation. <i>Allergic reactions to adhesive pads are possible.</i></p>
<p>Rehabilitation Therapies</p>	<p>Occupational therapy: Occupational therapists* treat pain through the therapeutic use of everyday activities. Can relieve pain associated with dressing, bathing, eating and working. Therapy includes activities that increase coordination, balance, flexibility and range of motion. <i>Therapy interventions and recommendations will not help if the patient does not practice as instructed.</i></p> <p>Physical therapy: Physical therapists* treat pain by restoring, enhancing and maintaining physical and functional abilities. <i>Therapy interventions and recommendations will not help if the patient does not practice as instructed.</i></p>
<p>Behavioral and Mental Health Therapies</p>	<p>Psychiatrists*, clinical social workers*, marriage and family therapists* and mental health counselors* provide therapies that identify and treat mental disorders or substance abuse problems that may be roadblocks to pain management. <i>When used to manage pain, these therapies can take time.</i></p>

PROCEDURE PREPARATION

ANTI-INFLAMMATORY MEDICATION ALTERNATIVES

Below are some alternatives that do not impair your healing mechanisms.

Acetaminophen (Tylenol) Take 500mg (1-2 tabs) every 6 hours as needed for pain. No more than 6 tabs or 3000mg in a day. If you have a prescription for Tramadol, take an extra-strength Tylenol at the same time to potentiate the effects of either drug alone.

Curcumin/Turmeric New Regeneration Curcumin has been found to be as effective as over-the-counter NSAIDs for the relief of osteoarthritis pain. Patients can take 750-1500mg or 1-2 capsules 2-3 times per day in conjunction with the Liquid Stem Cell Support Formula. ****If you are taking blood thinners, please discuss and obtain authorization before supplementing with Curcumin/Turmeric as it may increase the risk of bleeding.**

New Regeneration Omega-3 Two capsules provide 1000 mg of EPA and 500 mg of DHA and include lipase, a fat digestive aid to ensure maximum absorption. Regenexx fish oil products are provided in the triglyceride form (TG) and carry the TruTG seal. Take two capsules 2-3 times daily. **** If you are taking blood thinners, please discuss and obtain authorization before supplementing with Fish Oil as it may increase the risk of bleeding.**

Glucosamine Building block for cartilage. Helps with mild to moderate arthritis. Take combined with chondroitin +/-MSM. Take 1500mg daily divided into 2-3 doses in a day as it may cause stomach upset if taken all at once. If you are taking the Regenexx Stem Cell Support formula you do not need to supplement with additional Glucosamine.

Arnica homeopathic medication can be taken orally or topically. It helps with acute traumas, bruises, soreness, and arthritis. Take 2x daily for 1 week. If no improvement after 1 week, then stop.

Bromelain A pineapple extract and a natural anti-inflammatory. As a tablet take 500mg 2-3 times daily. In capsule formulations: 2,000MCU per 1000mg or 1,200 GDU per 1000mg.

Capsaicin Cream Made from hot peppers and decreases substance P which leads to decreased pain. Helps with pain in superficial joints and muscles. Apply a moderate amount of 0.025% or 0.075% cream up to 3 times daily. I recommend using gloves or washing hands very thoroughly after use because the cream can burn. Do not touch eyes, nose, mouth, or genitals after use as it can cause irritation and burning.

Biofreeze or other menthol products without aspirin. Truameel cream is also ok.

Allow 1-4 weeks to notice a difference in pain for Bromelain, fish oil, glucosamine, and Tumeric.

CORE-4 SUPPLEMENT PACKAGE

Your Regenexx Physician may have recommended our "Core-4" supplement package. This specific combination of supplements is proven to optimize results, as well as provide anti-inflammatory support throughout the course of your procedure. These supplements can be started as soon as possible and ideally should be taken both before and after your procedure. The package consists of a 30 day supply of each of the following.

REGENEXX ADVANCED LIQUID STEM CELL SUPPORT FORMULA: Supports healthy stem cell and cartilage production.

NEW REGENERATION CURCUMIN: A potent anti-inflammatory that promotes stem cell function.

NEW REGENERATION HIGH ABSORPTION OMEGA-3: An anti-inflammatory that protects cartilage and creates an environment that supports stem cell function.

NEW REGENERATION MELATONIN: Promotes stem cell conversion into cartilage.

The "CORE-4" is available in our clinic or can be ordered online through our website.

<https://newregenortho.com/new-regeneration-orthopedics-store/>

PROCEDURE PREPARATION

MEDICATION SUBSTITUTIONS

Please use the following list as a guide when discussing acceptable substitutes for your blood pressure and/or cholesterol medications with your prescribing physician.

DO NOT DISCONTINUE ANY MEDICATIONS WITHOUT SPEAKING WITH THE PRESCRIBING PHYSICIAN.

Suggested Substitutions for Cholesterol Medications (Statins)

Pantetheine Take 450 mg twice daily.

Fish Oil 2-4 grams of EPA+DHA per day or NewRegeneration High Absorption Omega-3, or Omega MonoPure 1300 EC by Xymogen 2 soft gels per day.

Zetia or Lopid (Gemfibrozil)

Niacin may start with 1000mg at dinner. May increase to 1500mg if well tolerated. Discuss with your primary Doctor. Add a small handful of nuts just prior to taking, such as 5-10 raw almonds, walnuts, or pecans, to slow niacin's absorption in the body. **Do NOT take niacin with an aspirin (as is often recommended) if you are planning a Regenxx procedure.** Avoid alcohol and spicy food when taking niacin, this may worsen the niacin flush. Do Not substitute with niacinamide or inositol hexanicotinate.

SUGGESTED SUBSTITUTIONS FOR BLOOD PRESSURE MEDICATIONS (-PRILS)

Hydrochlorothiazide(HCTZ)

Calcium Channel Blockers (CCB's)

Maxzide

If the above medications are not sufficient or not tolerated, then a **Beta Blocker** can be used. **Please avoid ACE inhibitors and ARBs.**

OTHER RECOMMENDATIONS FOR HIGH BLOOD PRESSURE

Ground Flaxseeds 2-3 tablespoons per day (average 15/7 drop in blood pressure).

Hibiscus Tea Two cups of strong tea using a total of 5 tea bags in the morning (4-6 point drop in systolic blood pressure).

Nitrate Rich Vegetables Arugula, Beets, Beet Greens, Basil, Swiss Chard, Cilantro, and Rhubarb. Eaten daily can reduce sodium intake to <1500 mg per day.

TO HELP MANAGE BLOOD PRESSURE WITHOUT THE AID OF A PRESCRIPTION, WE RECOMMEND THE FOLLOWING DEVICES:

Resperate is the only non-drug product cleared by the FDA for lowering blood pressure. It can be found at <http://www.resperate.com/shop>

Zona is a device proved to safely improve cardiovascular health using an easy to perform, non-invasive isometric therapy. It can be found online at <http://www.zona.com>

PRE-PROCEDURE RECOMMENDATIONS TO OPTIMIZE RESULTS NUTRITION

GENERAL RULES: For best possible outcome and post-procedure comfort

- Eat plenty of vegetables and fruits, whole-grain foods, and protein foods
- Choose protein foods that come from plants more often
- Choose foods with healthy fats instead of saturated fat
- Limit highly processed foods
- Prepare meals and snacks using ingredients that have little to no added sodium, sugars, or saturated fat
- Choose healthier menu options when eating out
- Make water your drink of choice. Replace sugary drinks with water. If you like soda, try naturally flavored carbonated water with no artificial ingredients or sugars
- Read food labels. Be aware that food marketing can influence your choices

FATS: The type of fat you eat over time is more important for health than the total amount of fat you eat

- Foods containing healthy fats: nuts, nut butter, seeds, avocado, fatty fish, extra virgin olive oil, avocado oil
- Foods containing higher saturated fat content: fatty meats, high-fat dairy products, some highly processed foods, some tropical oils such as palm oil and coconut oil, coconut cream, most fried foods
- Try different types of fatty fish such as trout, salmon, herring, mackerel
- Make your own salad dressing with olive or flaxseed oil. Add balsamic, rice wine or other kinds of vinegar. Flavor with lemon juice, Dijon mustard, garlic, and herbs

AVOID PROCESSED FOODS: when cooking, people may use highly processed foods for convenience and to save time

- These types of food products include: prepared sauces, ready to eat soups, ready-made dishes
- Make your own versions of these foods or replace them with healthier options

ADD FLAVOR: When you cook at home, you can decrease the amount of salt you use by adding herbs, spices and seasonings. Your taste buds will adjust to less salt in your food

- Instead of using pre-seasoned foods, salt, gravy, or sauces, enhance the flavor of your food by adding: citrus, flavored vinegar, fresh or dried herbs, and spices

HEALTHY COOKING METHODS: Baking, grilling, steaming, stir-frying, and sautéing

GRAINS: Choose whole grains only and avoid large quantities. Read labels carefully, even when advertising “whole grains”, most products mix with refined and processed grains (eg. “enriched wheat flour”).

- Try a variety of different grains: quinoa, amaranth, spelt, whole wheat, buckwheat, barley (if not gluten sensitive), oats, etc.

SUGARS: Avoid ADDED Sugars (raw or white sugar, brown sugar, coconut palm sugar, molasses, agave, corn syrup, fructose, maple syrup, honey, etc.) and fruit juices

- Avoid artificial sweeteners: sucralose (Splenda), aspartame (Equal and Nutrasweet), saccharin (Sweet 'N Low)
- Natural sweeteners - ok to use in small quantities: Monk fruit. Stevia, sugar alcohols (erythritol, xylitol), raw honey

For further assistance and guidance in optimizing your food plan for the best outcomes, it is recommended that you have a consultation with a registered dietitian/nutritionist. We recommend the following dietitians:

- o Paulette Weber: Phone: (941) 448-9633 or online at www.EnlightenedRD.com
- o Christine Miller: Phone: (813) 340-3084 or online at advancednutritionconcepts.com
- o Barb Mahlmeister: Phone: (813) 495-2179 or by email at barb@naturalchoicenutrition.com

NUTRITION & PHYSICAL ACTIVITY

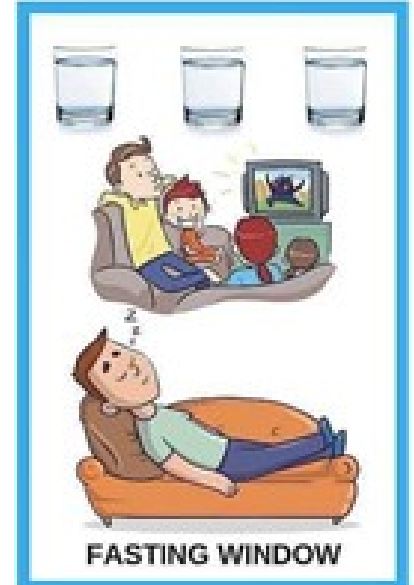
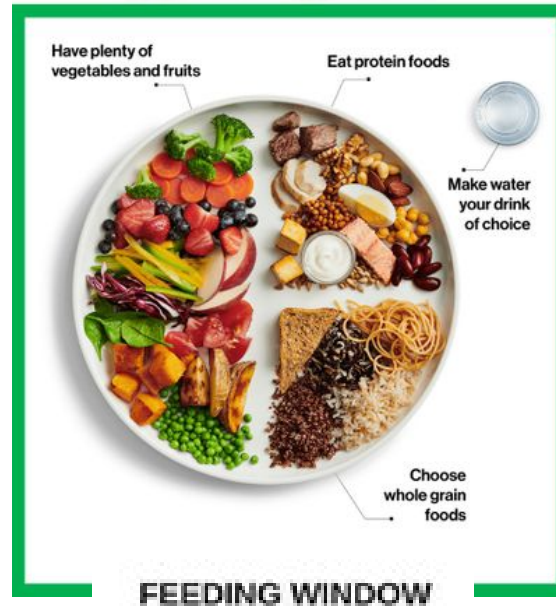
INTERMITTENT FASTING/TIME RESTRICTED EATING

2-3 TIMES OR MORE PER WEEK

BEFORE 12

12PM - 8PM

AFTER 8



7 Amazing Benefits to Fasting

- Autophagy**
 - Body naturally removes cellular debris
 - Body will always eat bad cells first
- Rise in Stem Cells**
 - Stem cell based regeneration of new immune cells
 - Healing of old injuries
- Rise in Ketones**
 - Ketones produced burn fat cells for energy
 - Ketones heal the brain, gut, and turn off bad genes
- Energy Diversion**
 - Energy is diverted from digesting and assimilates food
 - This down regulates inflammation and oxidative stress
- Hormone Optimization**
 - Cells become more sensitive to hormones and insulin
 - Insulin and glucose are controlled
- Resets Microbiome**
 - Fixes gut barrier
 - Influences our genetic expression
- Resets DNA**
 - Turns off bad genes
 - Powers up good genes

PLANT-BASED PROTEIN SOURCES

PROTEIN + HEALTHY FATS	SEEDS
NUTS 1 serving - 1/4 cup Provides 4-7g of protein, depending on the variety	SEEDS 1 serving - 1 ounce Provides 5-10g of protein, depending on the seed (Pump seeds are especially rich in protein)
TEMPEH 1 serving - 4 ounces Provides 20g of protein, depending on the variety	EDAMAME 1 serving - 1 cup shelled Provides 17g of protein
LENTILS 1 serving - 1/2 cup dried Provides 14g of protein	BEANS 1 serving - 1/2 cup cooked Provides 6-9g of protein
QUINOA 1 serving - 1 cup cooked Provides 8g of protein	MILLET 1 serving - 1 cup cooked Provides 6g of protein
AMARANTH 1 serving - 1 cup cooked Provides 9g of protein	WHOLE GRAIN PRODUCTS Provides 5-9g of protein, depending on the product
SEITAN 1 serving - 85g Provides roughly 20g of protein, depending on brand	NUTRITIONAL YEAST 1 serving - 1/4 cup (about 2 tablespoons) Provides 8g of protein
TOFU 1 serving - 3 ounces Provides roughly 9g of protein, depending on variety	SPIRULINA 1 serving - 2 tablespoons dried powder Provides 8g of protein
PROTEIN POWDER SUPPLEMENTS (Brown and sprouted rice, pea, and hemp) 1 serving - 1 scoop powder Provides 12-25g of protein, depending on the brand	

It is advised that you increase aerobic activity, targeting a minimum of 150 minutes (or 2.5 hours) per week. The chosen activities should not worsen pain in the areas for which you seek treatment. For treatments involving the lower extremities, low-impact exercises are best; examples include walking, elliptical, aquatics, or biking. **NOTE:** We would like you to say as active as you can comfortably, before and after your procedure. Our general rule is to participate in an activity to your comfort level without exceeding an additional 2/10 on your pain scale.

PRE-PROCEDURE PREPARATION

Fasting is required for 3 hours prior to the following appointment types:

- Mini Lipo Aspiration
- Some Cervical Spine Procedures (if indicated by your Regenexx Physician)
- Any procedure in which NITRONOX is used

You should fast from food 3 hours prior to each one of these appointment types. Avoid caffeine and hydrate with 48-64 oz of water per day for three days leading up to your procedure appointments. Being well hydrated will benefit your blood draw and lipo aspiration appointments.

*Fasting is NOT required for a standard blood draw/platelet procedure unless otherwise directed.

Lab Work

Our medical team will check your hemoglobin levels before your procedure.

In some cases, your Regenexx Physician may request a copy of your most recent blood work or order a CBC for you.

Imaging

If imaging is ordered for you our staff will obtain authorization from your insurance provider, if required, and submit the order to the imaging facility. The imaging facility will contact you directly once they have received the order and authorization to schedule your imaging appointment. To keep things on schedule We do ask that you contact us if you do not hear from the imaging facility in a timely manner. Imaging should be completed a minimum of 3 days prior to your procedure date.

It is recommended that you request a copy of the disk for your records, and bring the disk with you to your procedure.

Regenexx Registry

In the upcoming days/weeks leading up to your scheduled procedure, you will receive an email from the Regenexx Registry asking you to complete your pre-procedure survey. The registry collects anonymous, non-identifying outcome data. This registry data available at

[Regenexx Outcome Data](#)

Please be sure to complete your registration and pre-procedure survey prior to the day of your first scheduled procedure appointment. Your participation is greatly appreciated. Please note, this email does not come from our office, and if you have any questions you can contact the registry directly at registry@regenexx.com

Regenexx Medical Travel Concierge Service

Each of our patients has access to a complimentary medical travel concierge service that provides discounted rates for hotels close to our clinic locations. This service is beneficial for patients who may need to travel a distance or prefer the convenience of being close for the days of their procedure.

For our Regenexx Corporate Self-Insured patients, please contact info@regenexxtravel.com to see if you have additional benefits through Regenexx travel.

For Rates Click
HERE



POST PROCEDURE PREPARATION

3 Day Follow Up Call

The medical team will reach out to you 3 days post-procedure to check in with you. If you need to speak with the medical team prior to the post-procedure call, please use the contact information below.

To reach the medical team in

Dr. Leiber or Dr. Torrance patients: Call 941-357-1773 ext 104 or email staceyh@regentampabay.com

Dr. Papas or Dr. Valastro patients: Call 813-544-3123 ext 203 or email anariliz@regentampabay.com

6 Week Follow Up Appointment

A 6-week follow-up appointment is scheduled as part of your procedure. This appointment may be in-office, via TeleHealth, or by phone. For TeleHealth visits, you will use the link provided for your Regenexx Physician and log in 5 minutes prior to your scheduled appointment time to enter the "virtual waiting room". The doctor will join you as soon as he is available. This link can be accessed by computer, tablet, or smartphone. The doctor will want to know the following information for this visit, please keep this in mind while preparing for your visit.

1. Is the pain less severe? If so, by what percentage?
2. Is the pain less frequent? If so by what percentage?
3. Does the pain last as long as it did before? In other words, do you recover more quickly?
4. Does it take more activity to reach the same level of pain as it did before?
5. Does the body part have more endurance? If so what percentage?
6. Do you have more confidence (stability) in the body part than you did before? If so what percentage?
7. What is still most concerning to you regarding this body part?

Booster/Maintenance

Your Regenexx Physician may have included a booster as part of your procedure plan. In other cases, a booster or maintenance schedule may have been suggested. The typical booster/maintenance recommendations, if necessary, are 6 weeks, 6 months, biannually, or annually. If you would like to schedule a booster injection or if you would like to be added to a maintenance schedule, please contact your Care Coordinator, and they will schedule the procedure or add you to the maintenance schedule of your choice. Boosters are beneficial and can help push you past a plateau or maintain the progress made post-procedure. Boosters are a reduced fee platelet procedure that requires a blood draw appointment and a 15-30 minute procedure appointment.

Physical Therapy

You will be provided with a copy of your PT orders and protocol following your procedure. At this time the medical team will send the order to the PT facility of your choice. Most patients will have ongoing physical therapy care for at least 6 weeks after the procedure. Physical therapy is billable through insurance and is not covered in the cost of the procedure.

Bracing

In some cases, your Regenexx Physician may require bracing following your procedure. Our Bracing coordinator will arrange for your brace to be available to you following your procedure. Your procedure summary will provide the details in regards to duration. For most procedures involving the upper extremity, a sling is recommended for post-procedure comfort.

Weight-bearing Restrictions

For lower extremity procedures you may be instructed to be non or limited weight-bearing for 24-72 hours. If this is required for you, it will be indicated on your Patient Plan.

POST PROCEDURE PREPARATION

POST-PROCEDURE DRIVER/TRANSPORTATION POLICY

Our primary goal is patient safety. One of our concerns is whether you are safe to drive home. Our general recommendation is that you plan to have a driver following your procedure.

A DRIVER WILL BE REQUIRED FOR THE FOLLOWING

EPIDURALS AND SPINE PROCEDURES Injections in the neck, mid or low back (any spine injection). This may cause your arms and or legs to be numb for several hours. This can impair your ability to walk or operate a vehicle safely. Until these areas are no longer numb or weak, you are at increased risk of falling or injury.

ANY PROCEDURE USING PRE-PROCEDURE MEDICATION OR SEDATION Pre-medication (Xanax or Ativan) is ordered for each procedure. These sedative medications can cause drowsiness and impair one's cognition for many hours after taking the medication. It is important to avoid operating a vehicle for up to 8 hours after taking these medications and longer if feelings of sedation or alteration persist.

EXTREMITY PROCEDURES/NERVE BLOCKS When performing injections on any part of your extremities, numbing medications and/or local nerve blocks are used to reduce the pain associated with the procedure. These can cause local numbness and weakness for several hours and can impair one's ability to use the associated extremity. This may impair your ability to operate a vehicle and may put you at increased risk of falling or injury.

If you do not have a driver in these circumstances, then your procedure will be rescheduled.

If you choose to drive after any procedure/sedation, then you understand your risk of injury to you and others are increased by operating a vehicle and you take full responsibility for any injury that may occur to yourself or anyone else.

A DRIVER WILL BE OPTIONAL FOR THE FOLLOWING

Blood Draw appointments that do not require pre-medication or sedation.

Pre-injection (only) appointments that do not require pre-medication or sedation

Some injections for upper extremities or lower left extremities that would minimally impact driving that does not require pre-medication or sedation.

For your safety, it is the express recommendation that you have a driver for each of your procedure visits.

INTERVENTIONS FOR YOUR COMFORT

It is our goal to provide the best experience possible, with the best possible outcome from your procedure. For each of our patients, the doctor will order one or more of the following interventions based on your specific procedure plan.

REMINDER: A Driver is REQUIRED for any appointment for which you are medicated.

PRE-PROCEDURE MEDICATION A mild sedative ([Xanax](#) or [Ativan](#)) is ordered for most procedures. These mild sedatives are provided to allow you to relax your mind as well as your body. Having this relaxed state will allow for a more pleasant experience for the patient and the relaxation of the body will allow the doctor to navigate and execute the injections with ease.

POST-PROCEDURE MEDICATION

Our doctors prescribe various medications for post-procedure pain. Depending on your particular procedure you may receive more than one prescription. For more involved procedures, you may be instructed to take one medication for a period of time, followed by another for an additional period of time. In these cases, the doctor will provide clear instructions. Commonly prescribed post-procedure medications include [Hydrocodone](#), [Oxycodone](#), or [Tramadol](#). If you have a history of nausea or constipation with narcotics, please notify the medical staff and they will prescribe an anti-nausea medication and/or a stool softener in addition to your post-procedure pain medication.

PRE/POST PROCEDURE MEDICATIONS

Will be transmitted electronically to your preferred pharmacy. This order will be placed 24 hours prior to the scheduled procedure. It is not uncommon for this order to be placed over a weekend. The pharmacy should contact you when the prescription has been filled. If you do not hear from your pharmacy 24 hours prior to your procedure, please contact us so that we can be sure you have what you need prior to arrival.

PRE/POST-PROCEDURE MEDICATION INSTRUCTIONS

PRE-PROCEDURE Take one tablet of each medication ([one Xanax](#) or [Ativan](#) with [one Norco](#), [Oxycodone](#), or [Tramadol](#)) 1 hour prior to your procedure appointment (not prior to blood draw appointments) Unless otherwise recommended by your Regenexx Physician. The use of these medications in combination is specifically to create a "sedative" effect and should only be taken together, as directed by your physician, for the purpose of sedation during the procedure.

POST-PROCEDURE Take one tablet of [Norco](#), [Oxycodone](#), or [Tramadol](#) every 4-6 hours as needed for post-procedure pain. If you are not able to take these medications, [Tylenol](#) can be used as an alternative.

** If you are prescribed a combination of [Oxycodone](#) and [Hydrocodone](#), these medications are **NOT** to be taken together. [Oxycodone](#) should be filled first, it is stronger and may be used for the first 24-72 hours. After this period you may replace the [Oxycodone](#) with [Hydrocodone](#) and take it as needed for pain.

ANTI-NAUSEA MEDICATION (IF PRESCRIBED) [Phenergan \(25mg\)](#) Take one tablet by mouth every 4-6 hours as needed for post-procedure nausea. [Zofran \(8mg\)](#) Take one tablet by mouth every 8 hours as needed for nausea.

If you have a history of constipation with pain medication it is recommended that you take [Colace \(Docusate Sodium\) 100 mg](#) twice per day. this can be purchased over the counter at your local pharmacy. It is also recommended that you increase your fiber intake and stay well hydrated.

INTERVENTIONS FOR YOUR COMFORT

In addition to sedative medications, your Regenexx Physician may order one or more of the following:

LOCAL ANESTHESIA A numbing agent is applied to the surface of the skin followed by the use of image guidance to deliver the local anesthetic to the precise location for which you will be treated.

PERIPHERAL NERVE BLOCKS

In the majority of cases, the doctor will use the most conservative approach, using local anesthesia to create a "local block" or a "sensory block". In some cases, a peripheral nerve block may be indicated.

Lower Extremity Peripheral Nerve Block (knee, ankle, foot) This type of block will impact the entire extremity (both motor and sensory). This can be administered prior to your procedure to numb the leg and make the procedure more comfortable for you. We will ensure safe discharge from our office to your vehicle. Please note that with this type of block you will be advised not to bear weight on the injected extremity for a minimum of 5 hours post-procedure and the use of crutches or a walker will be required. This type of block is not used for every lower extremity procedure.

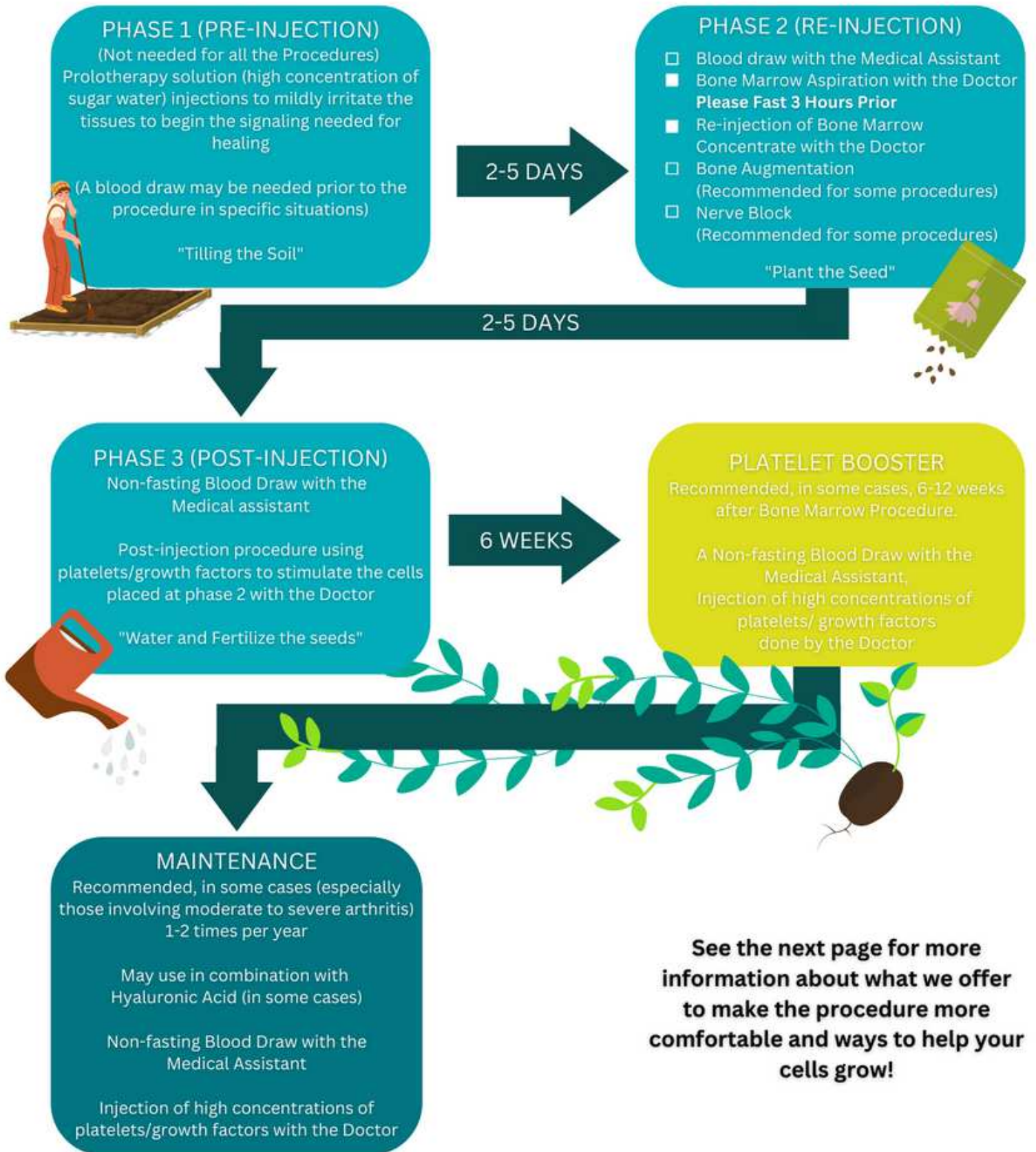
Upper Extremity Peripheral Nerve Block (shoulder, elbow, wrist, hand) This type of block will impact the entire extremity (both motor and sensory). This can be administered by the doctor prior to your procedure to numb the arm to make the procedure more comfortable for you. A sling should be worn post-procedure to provide stability and support. The nerve block will last up to 5 hours.

EXPAREL® 3 DAY NERVE BLOCK This intervention is used for the purpose of relief of pain during and after your procedure. During the procedure, the doctor places EXPAREL into the treated area. EXPAREL contains specially formulated bupivacaine (a type of local anesthetic) that is designed to release into your body over a long period of time for lasting pain relief. Because EXPAREL works over a period of time, you may need fewer doses of other medications, including opioids. For more information about EXPAREL 3 Day Nerve Block visit

<https://www.exparel.com/patient/faq> ask your Regenexx Physician if EXPAREL is right for you. If it is, EXPAREL can be added to your procedure for an additional fee. (Not available in all locations)

NITRONOX® Nitrous Oxide (50:50 mixture with oxygen) This intervention is used for the purpose of relief of pain and anxiety during your procedure. This option is an on-demand system. A small tube, similar to a straw, is given to the patient. The patient controls how much or little he/she breathes in from the mouthpiece and remains conscious the entire time. This option may be recommended by your Regenexx Physician for more complex procedures. NITRONOX is available to you for additional comfort and relaxation and can be added to your procedure for an additional fee. If you choose to utilize this intervention you will be advised to fast (from food, not liquids) for 3 hours prior to your procedure. NITRONOX may not be indicated for certain procedures that do not allow for proper positioning conducive to the delivery of the gas. This option will need to be ordered prior to the procedure date to ensure the availability of the appropriate supplies. Please contact your Care Coordinator if you are interested in adding this option to your procedure. (Not available in all locations and not indicated for some procedure types)

REGENEXX-SD PHASES



Procedure Day Expectations

PRIOR TO ARRIVAL: Patient Responsibility

- You have read and understood the information in the Procedure Guide
- The Registry Pre-Procedure Survey has been completed
- Arrangements for a Driver have been made
- If required, you have obtained crutches/walker/wheelchair
- If required, assistance at home has been arranged
- Medications have been received (24 hours prior to check-in)
- All imaging that was required has been completed and provided to the doctor

UPON ARRIVAL TO YOUR FIRST PROCEDURE APPOINTMENT

Consents and any outstanding balance for your procedure will be collected.

If you require a brace post-procedure our medical team will make sure your brace is fit properly and you are clear about the instructions for use.

A copy of your post-procedure discharge instructions along with a copy of your PT order and protocol will be provided to you and sent by our medical team to the location of your choice.

PHASE 1

Pre-medication is provided for this phase. Medicating is optional for this phase, however, it is recommended. If you are pre-medicating, please take your medication 1 hour prior to your scheduled procedure time and have a driver.

You will receive a prolotherapy pre-injection of a dextrose solution, which creates a mild inflammatory environment and helps damaged ligaments tighten. The pre-injection will initiate your body's own healing process and prepare your joints for the re-injection of the bone marrow concentrate (Stem cells).

Local Anesthesia is used to numb the area being treated.

In some cases, a blood draw followed by a pre-injection may be ordered.

Some mild stiffness and swelling is to be expected following the pre-injection.

Procedure Day Expectations

PHASE 2: BONE MARROW ASPIRATION

Fasting is **REQUIRED** for the bone marrow aspiration. No food or caffeine for 3 hours prior to this appointment. Hydration with plenty of water is strongly encouraged.

Pre-medication is **REQUIRED** for this phase. Please take your medication 1 hour prior to the bone marrow aspiration (as directed) and have a driver.

Your bone marrow will be extracted from the back of the pelvis (Iliac Crest).

Local Anesthesia will be used to numb the area, however, you may feel a "pressure" sensation.

After your bone Marrow aspiration and before your reinjection, you may have a light meal.

Bandages can be removed 24 hours after your procedure. Bandages should be removed **BEFORE** showering or bathing.

Following Phase 2 do not take a bath, sit in a tub or swim for 3 days. A shower 12 hours after the procedure is permitted. Keep the injection sites clean and dry.

RE-INJECTION

Pre-medication is **REQUIRED** for this phase. Please discuss dosage with the medical staff based on how you are feeling after the BMA, the amount taken for your Re-Injections may be modified. A driver is required.

Local Anesthesia will be used to numb the area, in some cases, a nerve block may be ordered.

Procedure Day Expectations

PART 1 BLOOD DRAW

Pre-medication is not required for the blood draw.

Fasting will NOT be required for the blood draw unless otherwise directed by your physician.

It is encouraged that you stay well hydrated for 48 hours leading up to your blood draw appointment.

The blood draw appointment will take approximately 15 to 30 minutes.

If MFat (MiniLipo Aspiration) is added to your post-injection, you will be required to fast for 3 hours prior to the aspiration.

** Please inform the medical staff, prior to your visit, of any difficulty giving blood in the past.

POST-INJECTION

Pre-Procedure medication (Xanax or Ativan) is to be taken one hour prior to your procedure. It is also advised to take one post-procedure tablet 1 hour prior to the procedure for additional comfort.

Local anesthesia is used to numb the area being treated. If we are treating an extremity (shoulder, elbow, knee, ankle, foot) you may be offered a nerve block.

The post-injection takes place approximately 2-5 days after the re-injection (phase 2) and acts as a 'fertilizer' to the injected stem cells. The post-injection is a combination of super concentrated platelets (SCP) and platelet lysate (PLM) which are both derived from your own blood. These growth factors aid and stimulate the injected stem cells to enhance the healing process.

In some cases, if indicated, the doctor may aspirate fluid from the joint to help ease post-procedure discomfort.

Procedure Day Expectations

ADD-ON PROCEDURES

In some instances, your procedure plan may include various add-on procedures. Based on your specific plan, these may occur at any phase of your procedure schedule

BONE AUGMENTATION

An interosseous (into the bone) injection, beneficial for cases involving avascular necrosis (AVN) or bone marrow edema. In the event that bone augmentation is required, you may have weight-bearing restrictions for 1-7 days (as instructed by your physician) and may need crutches after your injection.

MFat (MICRO-FRAGMENTED ADIPOSE TISSUE)

MFat may be added to your procedure, A mini lipoaspiration "mini-lipo" of fat tissue comes from your buttock area over the iliac crest and is a minimally invasive procedure. When used in conjunction with bone marrow and/or platelets, will provide cushioning and support to the treated areas. If MFat is added to your procedure, fasting for 3 hours will be required prior to the mini-lipo appointment.

A2M (ALPHA 2 MACROGLOBULIN)

Alpha 2 Macroglobulin is a powerful inhibitor of factors that break down tissue and stop the progression of osteoarthritis by preventing cartilage breakdown and loss. A2M deactivates these chemicals in the joint and traps them so that the body can quickly eliminate them. It acts as the "Pac man" of inflammatory chemicals in the joint. A2M can be used on its own or in conjunction with Platelet Lysate Material (PL-M) to soothe and minimize inflammation. A2M is derived from the blood.

AMNIOFIX®

Amniofix is an amniotic tissue product that contains amniotic membrane donated by healthy, consenting mothers undergoing scheduled Caesarean sections. The recovery of the membrane does not affect the baby or the delivery process. All tissue donors are tested for infectious disease, similar to the testing done for blood donation. The tissue undergoes a validated process to thoroughly cleanse and preserve the tissue including cleansing, drying, and sterilizing. Of note, there are no viable (living) stem cells in this product. Amniofix does contain hundreds of growth factors, specialized cytokines, and enzyme inhibitors that help enhance healing.

TENEX®

Minimally invasive relief for chronic tendon pain caused by overuse, injury, calcification, or bony prominence. The Tenex Health system provides a revolutionary single-procedure treatment for chronic tendon pain or bone spurs. The doctor will make a mini-incision and insert the TX MicroTip. Using ultrasonic energy, it precisely cuts and removes damaged tissue, while preserving healthy tendons.

Procedure Day Expectations

ADD-ON PROCEDURES

Extracorporeal Shock Wave Therapy (ESWT)

Extracorporeal Shock Wave Therapy, commonly referred to as ESWT, may be recommended as part of your care and recovery. ESWT involves placing a handheld device at the target tissue, where it delivers controlled Shock Wave Energy into the inflamed tendons, bones and tissues in order to stimulate angiogenesis (new blood flow), decrease inflammation and help the target tissue remodel. Multiple studies have shown impressive improvements in damaged tendons and bones following ESWT treatments. This technique is used to help these areas heal themselves by stimulating the growth of new blood vessels, and ultimately leading to less pain.

A typical treatment takes about 10 min and most patients do not have any downtime following treatment, although occasionally minor soreness or bruising can occur. Successful ESWT procedures result in the body producing new tissue and new blood flow in order to restore function, which should take place gradually over the next several weeks. A series of ESWT treatments is usually necessary for patients to achieve the best possible results based on the available data.

Post-Procedure Expectations

If you have been given weight-bearing restrictions, do not place weight on the treated joint for the timeframe specified by your doctor (typically 1-5 days). The following will apply once you have returned to weight-bearing status.

DAY 1-3 (FOLLOWING PHASE 2 RE-INJECTION)

LOWER EXTREMITY

For the first day, you should limit activity on the joint. If you have post-procedure soreness this may be easy to do, as you may have a natural limp or “antalgic” gait (your body does this to reduce pressure on the area to allow healing). If you don’t have this, then taking a bit of weight off this area as you walk is a good idea for the first several days (you can use a cane). Limit your weight-bearing activity. Complete the provided “DVT” stretches and exercises as tolerated to encourage blood flow through the lower extremities. Avoid all contact sports as well as jogging, running, or sports that involve impact on the joint. If you experience swelling in the joint post-procedure and you have a brace that does not fit properly due to this swelling, do not force the joint into the brace. Simply limit your weight-bearing at this time and utilize the brace as swelling decreases.

UPPER EXTREMITY

DO NOT LIFT MORE THAN 10 POUND DURING THE FIRST 4 WEEKS

A soft-sling is recommended, as needed, for post-procedure comfort. For the first day, you should limit the activity of the joint. If you have post-procedure soreness this may be easy to do, as you may naturally limit motion (your body does this to reduce pressure on the area to allow healing). Limit activity to as tolerated, avoiding >2 of 10 on your pain scale. Avoid all contact sports that involve impact on the joint.

DAY 4-14 FOLLOWING RE-INJECTION (PHASE 2)

You can start to move normally, no more than 30/60 minutes per day of increased activity involving this joint or tendon. Avoid all contact sports as well as jogging, running, or sports that involve impact on the joint. For lower extremity, Bike riding, stationary bikes, & elliptical machines (low impact) activities may be added. Swimming may be fine for both upper and lower extremities, but please increase activity based on guidance by your physical therapist, who will be following a specific protocol that we will provide to them.

DAY 21-42 (6 WEEKS POST-PROCEDURE)

Continue to increase activity with the guidance of your physical therapist. Avoid all contact sports as well as jogging, running, or sports that involve impact on the joint. For lower extremity, Bike riding, stationary bikes, & elliptical machines (low impact) activities may be added. Swimming may be fine for both upper and lower extremities.

6-WEEK FOLLOW-UP VISIT

At 6-weeks post-procedure you will have a follow-up appointment. This appointment may be in-office, phone or TeleHealth Follow up or if recommended a booster injection. At this time you will be cleared for additional activities.

DISCHARGE INSTRUCTIONS

What to expect following your procedure

You may have increased pain 6-8 hours following treatment (when the numbing solution wears off) and it may last for 2 days or longer (up to one to two weeks for shoulder, plantar fascia, Achilles tendon, elbow, and hand/wrist).

- We suggest moving the joint around gently multiple times within hours after the injections to disperse the platelet-derived injection or prolotherapy throughout the tissues. This seems to decrease the amount and duration of pain from the injections.
- No excessive activity in the hours after injection.
- Avoid the temptation to overdo it because the numbness is still in effect.
- Please reduce activity involving the treated area for 24-48 hours after the injection. At that point, light range of motion, isometric exercises as tolerated may be started.
- No heavy lifting. No strenuous physical activity for one week after the injection.
- We suggest waiting 4 -6 weeks before returning to full strength activities unless instructed otherwise by your physician. Your treating physician may provide you with a physical therapy referral to follow a specific rehabilitation protocol.
- For lower extremities (lumbar spine, hip, knee, ankle, foot): While your activities are reduced, please complete the "DVT exercises" that have been provided. These exercises and stretches are designed to encourage blood circulation through controlled, low impact movements that reduce the risk of deep vein thrombosis (DVT) post-procedure.

IF YOU EXPERIENCE ANY OF THE FOLLOWING CALL OUR OFFICE:

1. Fever, chills, sweats, hardness, or redness at the injection site.
2. Heart palpitations, sweating, increased heart rate related to the procedure.
3. A marked increase in pain after the procedure that lasts more than 2 weeks.
4. Fluid retention, swelling in the face, or severe insomnia due to the injection.
5. Severe headache after an epidural injection. This could indicate a "Dural leak" and usually resolves without complication

For Dr. Leiber & Dr. Torrance patients: (941) 357-1773 Medical Questions Ext: 104

For Dr. Papas and Dr. Valastro patients: (813) 544-3123 Medical Questions Ext: 203

IF YOU NEED TO REACH US AFTER HOURS, CALL THE CLINIC AND CHOOSE "SPEAK TO THE PHYSICIAN". A MESSAGE WILL BE SENT TO THE DOCTOR AND THEY WILL CONTACT YOU.

DISCHARGE INSTRUCTIONS

Procedure Aftercare

PAIN MEDICATION

Your doctor will likely prescribe a pain medication to have available in case you need it post-procedure. It is likely that you will need it for approximately 48-72 hours; sometimes longer.

Tylenol is acceptable to take, as it is not an anti-inflammatory.

BANDAGES

Bandages can be removed 12-24 hours after your procedure. Bandages should be removed before showering or bathing.

SWIMMING/BATHING

Avoid immersion in water for 72 hours. Showering is permitted after 12-24 hours.

MINI-LIPO ASPIRATION AFTERCARE (M_Fat Procedures)

The area of the buttock where fat was removed will be sore and bruising will likely occur, this is normal and can last a week or two. The bruising may change color over days or weeks post-procedure (like a black and blue mark). We encourage icing the buttock region where the fat was aspirated from.

DO NOT Ice injection sites, only aspiration sites

If you have concerns about the aspiration area, please call the medical staff.

BRACING

If you have been asked to wear a brace post-treatment, please be mindful of swelling. Some braces fit tightly and can cut off circulation if worn while the affected area is swollen.

PERIPHERAL NERVE BLOCKS

Nerve blocks affect nerves that control movement, pain, and normal sensation. You may have had nerve block to provide for more comfort during and after the procedure. The block can last from one to four hours depending on the type and amount of medications used. (If EXPAREL was used, the block will last for 3-5 days.) Weakness usually wears off first, followed by the sensations of tingling and heaviness, but this can vary.

HOW DO I PROTECT MY AFFECTED ARM OR LEG?

- Do not bear full weight on any lower extremity until the block has fully worn off - You may not be able to feel pain, pressure, or extremes of temperature in the affected limb until the block wears off and are therefore at risk for injuring your limb (e.g., you could burn your limb on an extremely hot surface and not feel it).
- When resting, periodically reposition your blocked limb to avoid placing prolonged pressure on it. You may need help to do this.
- While sleeping, you may need pillows or padding to avoid rolling onto the limb or putting too much pressure on it.

DISCHARGE INSTRUCTIONS

Additional Considerations for Procedures requiring Bone Augmentation

POST-PROCEDURE INSTRUCTIONS FOR PROCEDURES WITH BONE AUGMENTATION

FOR HIP PROCEDURES

You may be advised to begin with toe-touch weight-bearing for 1 week with crutches (or in a wheelchair), followed by partial weight-bearing (with a crutch or cane) until the pain returns to baseline (the level you experienced prior to your procedure). This usually takes about 7-10 days. Once you have returned to your baseline, you may progress to weight-bearing as tolerated.

FOR KNEE PROCEDURES

You may or may not have weight-bearing restrictions post-procedure. You may be partial weight-bearing with a cane or crutch and an unloader brace may be advised before returning to full weight-bearing with an unloader brace. Most of the time, there is no weight-bearing restriction for knee bone augmentation. Your pain levels will normally guide you back to unrestricted weight-bearing.

FOR ANKLE/FOOT PROCEDURES

You may or may not be non-weight-bearing for 1-2 weeks before progressing to limited weight-bearing with a brace. Most of the time, there is no weight-bearing restriction for foot and ankle bone augmentation.

FOR UPPER EXTREMITY PROCEDURES

The use of a sling to limit activity may be recommended for the first 2-3 days. Begin to progress with activity slowly, let your pain be your guide. Do not lift over 10 lbs during the first 4 weeks after the procedure unless otherwise directed by your Regenexx Physician.

DISCHARGE INSTRUCTIONS

Post-Procedure Guidelines

PHYSICAL THERAPY

The medical team will provide you with a copy of your PT orders and protocol along with a copy of your discharge instructions. They will fax the PT order to the facility you have chosen. You should begin Physical Therapy within one week of the conclusion of your procedure and typically lasts about 6 weeks. Physical Therapy is billable through insurance and is not covered in the cost of your procedure.

THERAPEUTIC MODALITY GUIDELINES/RESTRICTIONS

ICE SHOULD NOT BE USED ON INJECTION SITES FOR A MINIMUM OF 2 WEEKS POST-PROCEDURE

Ok at any point: TENS units, alpha stim, PEMF (BEMER) light therapy, paraffin, massage, low velocity/gentle manipulation, IMS/dry needling, acupuncture.

- Wait until you are at phase 3 of rehab or at least 2 weeks post-procedure before doing: joint mobilization, chiropractic, muscle activation therapy, active release therapy
- No ultrasound therapy within 2 weeks of the procedure. No ionto- or phono-phoresis for 6 weeks and never with NSAIDs or steroids.



REMINDER:

For optimal outcome, please review and follow any medication changes your Regenexx Physician has recommended both before and after your procedure

SCHEDULING A REGENEXX PROCEDURE

YOUR REGENEXX CARE COORDINATOR

Will provide you with cost and planning information based on the doctor's procedure recommendation. They will work with you to find a schedule that works for you and help you by providing the information you need to prepare for your upcoming procedure. Your care coordinator will be your support person through the course of your procedure and is available to answer any questions you may have as well as assist you with scheduling future procedures.

NON-REFUNDABLE ADMINISTRATIVE SCHEDULING FEE

To finalize the scheduling process a Non-Refundable Administrative Fee will be collected. The Administrative fee required for Platelet Based Procedures is \$500.00 and for Bone Marrow Concentrate Procedures is \$750.00. This portion of your procedure fee is for services rendered prior to your procedure and will be applied to the total balance due at check-in.

** Administrative fee does not apply to Corporate Self-Insured Patients

CORPORATE SELF-INSURED PATIENTS

We will submit the recommended procedure plan for pre-authorization (typically 24-48 hours). Any questions regarding the cost associated with your procedure are handled directly by Regenexx Corporate Benefits. They can be reached at 888-547-6667.

CANCELATION AND RESCHEDULING POLICY

In the event you need to cancel or reschedule your procedure, we ask for a minimum of 2 weeks' notice. This will allow us the opportunity to fill your appointment times with someone who may be on our waiting list. Cancellation will result in a loss of your Administrative Scheduling Fee. If you reschedule, a \$150.00 Rescheduling Fee may apply. To make any changes to your procedure schedule, please give as much advance notice as possible and contact your Care Coordinator for assistance.

ACCEPTABLE FORMS OF PAYMENT

Cash, Certified Check, Money Order, or Personal Check. Please note: If paying with a personal check, the check must be **RECEIVED** 3-5 business days prior to the start of your procedure.

Please make checks payable to New Regeneration Orthopedics

COMPANY DIRECTORY

At Regenexx Tampa Bay one of our Core Values is "Patient Above All Else"

In an effort to direct you to the correct person for assistance please refer to the directory below. Any of the extensions listed can be dialed as soon as the recording begins, you do not need to wait to be prompted.

CARE COORDINATORS

For Dr. Torrance	Tracy Rosenboom	727-201-5188	tracyr@regentampaby.com
For Dr. Papas & Dr. Valastro	Yessenia Sanchez	813-549-3742	yessenia@regentampabay.com
For Dr. Leiber	Laurie Cione	941-779-1550	lauriec@regentampabay.com

Our care coordinators are often with patients and may not be able to answer immediately. If there is a time-sensitive issue, or if you need assistance after normal business hours or on the weekend, please contact Kimberly Langlois. 941-462-2920 or at kimberlyc@regentampabay.com

MEDICAL TEAM LEADS

For Dr. Torrance	Kyden Payne	727-284-5250 ext 21-208	kydenp@regentampaby.com
For Dr. Papas & Dr. Valastro	Anariliz Morales	813-544-3123 ext 21-203	anariliz@regentampabay.com
For Dr. Leiber	Stacey Hanley	941-357-1773 ext 20-101	staceyh@regentampabay.com

For questions related to PT Orders, Post-procedure complications, and Prescription status please contact the medical team for your doctor.

ADMINISTRATION

Practice Manager	Kimberly Langlois	941-357-1773 ext 301	kimberlyl@regentampabay.com
Sarasota Front Desk	Heather Myrick	941-357-1773 ext 100	heatherm@regentampabay.com
Tampa Front Desk	Karen Brady	813-544-3123 ext 201	karenb@regentampabay.com
St. Pete Front Desk	Chelsea VanDyk	727-284-5250	chelseav@regentampabay.com
Billing	Alexis Gerber	941-357-1773 ext 105	alexisg@regentampabay.com
Regenexx Corporate Benefits		1-888-547-6667	

AFTER HOURS MEDICAL ASSISTANCE: Please call 941-357-1773 for Dr. Leiber or Dr. Torrance 813-544-3123 for Dr. Papas or Dr. Valastro and select the "speak with a physician" prompt.

COMPANY DIRECTORY

FOR ADDITIONAL INFORMATION PLEASE CLICK THE LINKS BELOW

[For information about our locations & Physicians](#)

[For Frequently Asked Questions](#)

[For Procedure Outcome Data](#)

[For Our Online Library](#)

[For Research Information](#)

[Bone Marrow Concentrate Procedures](#)

[Platelet Procedures](#)



[For information or to apply click here](#)

[Patient Resources](#)

[Online Store](#)

[Patient Portal](#)

[Medical Travel Concierge](#)

OTHER SERVICES OFFERED

Ask your Regenexx Physician if one of these services may benefit you.

MICRO-INVASIVE CARPAL TUNNEL RELEASE (CTR) WITH THE SX-ONE MICROKNIFE®

The SX-One MicroKnife is a low-profile, safe, and effective instrument that allows your doctor to perform carpal tunnel release in a matter of minutes. When combined with ultrasound visualization, the procedure requires only a very small (4-5 mm) wrist incision.

FOR MORE INFORMATION CLICK THE LINK BELOW



TENEX HEALTH TX SYSTEM – CLINICALLY PROVEN TO REMOVE TENDON PAIN FOR OVER 85% OF PATIENTS

This technique helps patients restore musculoskeletal function without the need for invasive surgery or general anesthesia, may give you quick pain relief, and should have you back to enjoying the things you love in a few weeks to a few months.



TENEX
HEALTH



Providing Non-Surgical Orthopedic Solutions
From Trusted Regenerative Experts

LOCATIONS

SARASOTA

5630 Marquesas Circle
Sarasota, FL 34233
941-357-1773

TAMPA

8600 Hidden River Parkway, Suite 700
Tampa, FL 33637
813-544-3123

ST. PETERSBURG

100 2nd Avenue South, Suite 904S
St. Petersburg, FL 33701
727-284-5250

ORLANDO

1412 Trovillion Way
Winter Park, FL 32789
407-856-3695

Thank you for choosing us to get you back
to doing the things you love to do!