



PERFORMANCE
INJURY CARE & SPORTS MEDICINE

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Post PRP/Whole Blood Injection Care Instructions

PRP/Whole Blood Injection As with any injection; infection, bleeding and allergic reaction are the most common side effects. Your risk for infection is extremely low as concentrated platelets act as an antimicrobial (prevents infection) agent. Some estimates of infection rates after PRP injections are around 1:40,000. But if you have swelling, redness and warmth at the injection site you should give us a call. If you develop fever or chills and it is the weekend you should go to one of the urgent care clinics or emergency room for an evaluation. During the week you should just give us a call or come in to our walk-in clinic so we can take a look. Over the weekend or after hours call 406-422-5817 and select the third option to leave a call back number. The site we collected your blood from might experience some bruising, but persistent oozing should prompt a phone call to us.

The site of the procedure could be sore for the first several days after the procedure. Treat pain and swelling with ice, elevation, compression with an ace wrap, and if needed the pain medications we provided. Passive range of motion (helping it move) hourly is helpful to decrease pain and stiffness.

Protected motion should help as well—so if we fitted you for a brace or gave you crutches, use them! Remember no Ibuprofen or Naproxen (NSAIDs) for 4-6 weeks after your procedure. You may use Tylenol (acetaminophen) for pain control alone. However, many combination pain relievers such as Norco, Lortab and Percocet have Tylenol in them as well. If you look on your pain prescription bottle you will usually see (hydroco/ASAP) which signifies that hydrocodone and acetaminophen are included in your prescription. You will typically see 5/325 or 5/500, but dose and the ratio may change depending on which medication was prescribed. The first number relates to the hydrocodone portion of your prescription and the ASAP is the acetaminophen. Your total dose of acetaminophen should not exceed 2,000 - 3,000 mg per day so keep track of how much acetaminophen you take per 24 hour period.

You were most likely given an anesthetic agent during the procedure, which should provide you with good pain control for 2-4 hours. After the anesthetic wears off you may experience worsening pain, so you should take an oral pain reliever about 30-60 minutes after the procedure.

You should stretch the affected area every 1-2 hours with gentle range of motion and eccentric stretching (lengthening the muscle/tendon/joint). If you leave it immobile over a prolonged period (days) you may experience worsening pain. Remember..... "motion is lotion"!

What things should I look out for? As with any procedure, the major risk is infection and bleeding. If you notice redness and warmth to the injection site after the procedure please contact us. Typically, this occurs by the second or third day. Bleeding is the other major risk. Although some bruising is typical, if you notice an abnormal amount of swelling and/or bruising you should contact us.

Allergic reaction? During the procedure we used an anesthetic agent and if you notice a small rash, hives or itching near the injection site you might be having an allergic reaction to the anesthetic. If you are having symptoms at other locations, you might be having a reaction to your pain medications. You can consider taking some Benadryl (diphenhydramine) but you should contact us if the symptoms progress. Stop your pain medications and contact us. If you have tightness in your chest or difficulty with breathing or swallowing, call 911 or get to the emergency room ASAP. If in doubt call for help, as things could get worse quickly. Most dangerous allergic reactions happen quickly within minutes to a few hours of the injection. Severe allergic reactions are rare with steroids, as we typically give you steroids to help in the treatment of an allergic reaction.



What should the First week be like?

You will be sore the first few days but generally, can return to your normal day to day activities with protection of the procedural site from moderate to heavy work. Typically, for upper extremity procedures you will have a weight limit of a few pounds. You should do your range of motion and stretching exercises hourly while awake. For lower extremity procedures you should use a single crutch or avoid excessive ambulation. Keep the limb elevated when at rest and avoid prolonged standing.

How are things different the following weeks? Remember the procedure actually weakens the tendon or target tissue for the first two weeks. By week two, the tissue has been restored to its pre-procedure strength. By week four it's stronger than before and can be used with light duty activities. Some activity is good as it encourages the regenerating tissue to lay down cross-linking which strengthens the tissue.

When will the healing process be completed? Healing is an individual event. Some people just seem to heal faster than others, so be patient. After 6-8 weeks those under 50 years of age will have significant pain reduction and be pain free for some activities but still complain of muscle fatigue. This is normal. Remember you have to retrain these muscles to work. With an injury you will have deconditioning of the tendon/muscle. For those over 50 years of age the process can take longer. Your pre-injury health, nutrition and medications can influence how long it takes to recover.

More Questions? You will be seen in follow-up at 2 weeks from the procedure, and at 6 weeks. We will try and answer question during appointments but you can call for additional information when needed. (406) 422-5817