

## CAREprp FAQs

CAREprp Preparation Video:

<https://www.youtube.com/watch?v=RcaMoXq2Alo&t=28s>

Anti-inflammatories are “anti-platelet” and should be avoided; although Tylenol is OK and will not interfere with platelet activity. Aspirin should be discontinued 1 month before PRP. Other NSAIDS should be stopped 1 week prior.

Wait at least 2-4 weeks after a steroid injection (or avoid completely).

Blood thinners should be avoided if possible. They may have a negative effect on blood separation.

Every patient is different, but a general guide for volume is: 5-10ml for a knee and 2-3ml for a hip

The average number of platelets per ml of CAREprp, depending on the patient and concentration, is 300,000,000. The low-end is 150,000,000 platelets/ml with 450,000,000+/ml being the high-end.

There are two options with a yield that remains reddish. If it's a clear red then there's something going on with the patient's blood or medication. A 2<sup>nd</sup> spin is suggested after opening the top collar a little more. It may improve, but won't be perfect. If it's still a dark red then open up the top a bit more, make sure it jiggles yet doesn't fall off and spin again for another 4 minutes. The patient's blood might just have been thicker than typical or the top wasn't initially open to the full 1 1/3 turns.