



Consent for Platelet-Rich Plasma (PRP) Therapy

Patient: _____

DOB: _____

I have requested, authorized and consented to undergo a Platelet-Rich Plasma (PRP) Therapy. I certify the following statements represent my understanding and acceptance of the conditions and risks involved in the use of PRP therapy.

PRP Processing and PRP Injection:

PRP is a concentrate of platelet-rich plasma protein derived from your blood which is used to stimulate healing of soft tissue and joints.

PRP requires your blood to be drawn by a nurse or laboratory professional. The amount of blood drawn will be determined by the type of injection you are receiving. In general, approximately 60-180 mL of blood will be drawn from a vein in your arm. The blood is then processed by rapidly spinning and separating the platelets and other beneficial growth factors from the blood to be used for injection therapy. The doctor will use the platelet-rich plasma to inject into the indicated soft tissue area or joint.

The entire PRP process takes approximately 30-45 minutes. The risks associated with venipuncture and the PRP injection are extremely small. Please carefully read the following section for more information.

Risks of PRP:

- Short term adverse reactions may occur including mild pain and discomfort during and after injection. This is because we are stimulating an inflammatory and healing response. It is also possible to develop a low-grade fever, body aches, or fatigue.
- Your own cells and tissues are used which reduces risk for contamination or rejection. Bruising may occur at or around the injection site.
- Very low risk of infections, DVT, or neurovascular injury.
- It may require more than one injection to achieve the desired relief. Patients may require 2 or 3 treatments. The assessment of an injection is normally assessed at least 6 weeks after the first injection.
- The body starts the healing process over the first 4-6 weeks, but can take up to 9-12 months to completely heal depending on the problem. Symptoms and mobility generally improve over the first 4-8 weeks.
- There is no guarantee that PRP will produce the desired results.

Patient Signatures:

In signing this PRP Intrauterine Consent, I agree that:

- I have been given a copy of this consent (if desired).
- I agree the cost of \$850.00 for this procedure is my responsibility.

I do hereby absolve, release, indemnify, protect, and hold harmless Lakeview Clinic, their providers and staff from any and all legal liability arising from this treatment.

Patient Signature: _____ Date: _____

Witness Signature: _____ Date: _____

Note: Signature must be witnessed.

This consent has been read and discussed with the patient, including the availability of alternative treatments and all questions answered.