

RECEIVING



1. ReGen Anu Rheo is human tissue allograft that is received in a box on dry ice.* *Provided aseptic but NOT sterile.*

2. Before opening the box, Check the label. You must use graft before the expiry date or transfer to a cryo freezer. Use gloves with dry ice.

3. Move to an ultracold cryo freezer and store at -80°C +/- 15C° or move to office/OR.



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ANU LIFE SCIENCES

PREPARATION & DILUTION

The necessary materials for the procedure are:

- Regen Anu Rheo graft
- A 3cc Syringe
- 18 Gauge Needle
- 22 or 23 Gauge Needle
- The Dilutant of Choice

Acceptable Dilutants:

- Normal Saline
- 1% preservative free plain lidocaine or Marcaine
- Platelet rich plasma



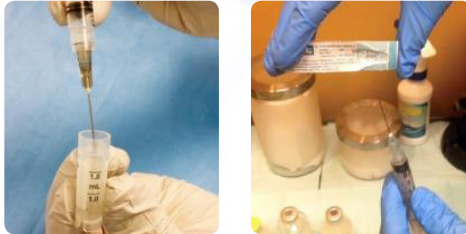
Prohibited Dilutants:

- Glycerol (eg. Grafton DBM)
- Glucose Solutions (eg. D5NS)
- Epinephrine
- Lidocaine/Marcaine with preservatives
- Lidocaine/Marcaine in joints
- Chemical debridement (eg. Santyl)
- In IV or with intra-arterial injections

PREPARATION & MIXING



1. Remove the package from freezer or dry ice container. Cut the package. **Outside of vial is not sterile*
2. Defrost vial by holding still in hand for 3-5 minutes. **Do not shake vial*
3. Fill syringe with diluent. (typically, 1:1 ratio)



4. Draw Regen Anu Rheo into syringe with 18g needle.
5. Use a 22 or 23g needle for implantation but nothing smaller than a 23g

PREPARING THE PATIENT

When treating tendons, joints, fascia or facets it is recommended to use one of the following to initiate an inflammatory response:

- Extra Corporeal Shockwave Therapy
- Radial Pulse Therapy
- EPAAt LASER – TaG, Diode
- Coblation



Alternatively, in the office you may use:

- Needling
- Trephining
- Movement



RECOMMENDED JOINT DOSING

Shoulder

1ml Rheo
1:2 up to 1:4 dilution

Elbow

1ml Rheo
1:1 dilution

Wrist, Fingers & Facets

(per joint) 0.25ml, Rheo
1:1 dilution

Hip

Stage 3: 0.5ml Rheo
Stage 4: 1ml Rheo
1:2 dilution
2ml Rheo
1:2 up to 1:3 dilution

Ankle

1ml, Rheo
1:1 dilution

Subtalar & Midfoot

Joints
0.5ml Rheo, 1:1 Dilution

MPJ's & Toes

per joint)
0.25ml, Rhe 1:1 Dilution

POST IMPLANTATION PROTOCOL

Stimulation or Inflammation of tissue is desired to increase success:

- No Anti inflammatory
- No Aspirin
- Minimize immobilization
- No icing
- Protected Active Rehabilitation is recommended

Tendon Repair Directions

Implant under Ultrasound guidance. Direct into & around Paratenon for:

- Tendinosis
- Tendonopathy
- Tenosynovitis
- Small Cuff Tears
- Bursitis

