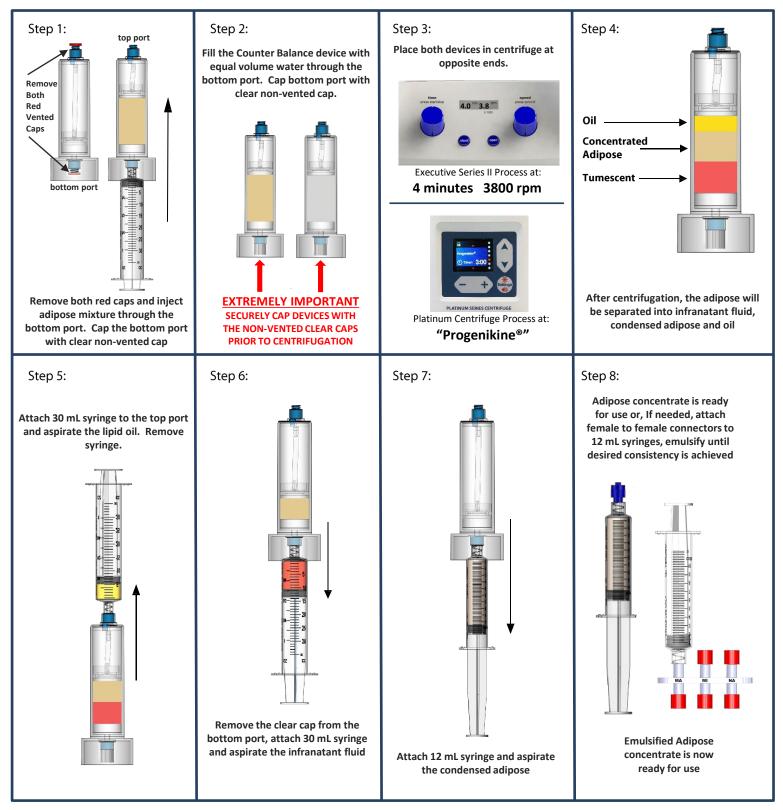


PK25 Adipose QUICK GUIDE WWW.ACCELLERATEDBIOLOGICS.com 1-800-367-0844

PK25 ** PLEASE DISCARD BOTH RED VENTED CAPS FROM CONCENTRATING DEVICE BEFORE USE ** ** PLEASE CAP CONCENTRATING DEVICE AND COUNTERBALANCE WITH CLEAR CAP PRIOR TO CENTRIFUGATION**

Note: Always swab self sealing ports with sterile alcohol prior to accessing with a sterile syringe





STEP 1: Preparation

- 1. In a non-sterile fashion drape patient to protect patient's garments.
- 2. Mark desired area for fat grafting with a black skin marker using the length of the harvester as a guide.

STEP 2: Fat Harvesting

- 1. Put on sterile or non-sterile gown and sterile gloves.
- 2. Prepare exposed area with Betadine swab (use Chloroprep if allergic to betadine).
- 3. Cover patient's garments with included fenestrated sterile drape with fat graft area exposed.
- 4. Anesthetize entry area of grafting "puncture" with 3mL 5 mL of 1% or 2% Lidocaine.
- 5. Prepare sterile area with "Fat Harvesting instruments".
- Prepare Tumescent Mixture: in a 60ml syringe fill will 50cc of 0.9% Normal Saline and 10cc of 1% Lidocaine with Epinephrine (optional: buffer of 3ml of 8.4% Sodium Bicarbonate. Note that various tumescent formulas exist)
- 7. With #11 blade scalpel make a puncture hole about 1cm deep.
- Attach 60mL syringe with prepared tumescent mixture to infiltrator cannula. Infiltrator cannula can be substituted with 18G-20G spinal needle 6" - 7".
- 9. At about a 45 degree angle introduce the infiltrator cannula to marked area while injecting tumescent throughout. Be sure to create a "tunneling" effect with the cannula to assist with loosening fat cells for fat extraction.
- Attach harvester cannula to 30 ml Vaclock syringe or VPH handle to empty 30mL syringe. Introduce the harvester cannula into puncture hole. Pull back on syringe handle until it locks in place. With a "back and forth" motion extract fat cells. Repeat above step until desired sample is obtained (goal extraction is about 30 mLs)
- 11. Cap sample. Decant sample for at least 1 minute and express the infranatant fluid into disposable cups prior to placing in concentrating device. Clean patient with alcohol and apply steristrips.

STEP 3: Processing

- 1. Transfer fat into sterile PK25 concentrating device. Fill the counterbalance with equivalent volume of water. CAP OFF BOTH DEVICES WITH INCLUDED CLEAR CAPS
- 2. Place capped counterbalance and PK25 concentrating device in the centrifuge buckets at opposite ends of the rotor.
- 3. Set the Executive Series centrifuge to 3800 rpm and 4 minutes, set Platinum centrifuge to "Progenikine" close lid & press start.
- 4. When the centrifugation process is complete remove the separated fat sample *slowly*. **KEEP DEVICE VERTICAL AT ALL TIMES**
- 5. With a 30ml syringe, attach to top port and remove all the oil and lipids first. Remove syringe and place on bottom port and remove all blood & fluid portion on bottom of adipose separating device. Discard 30mL syringe with oils, blood, & fluid.
- 6. Attach 12ml syringe to bottom port to aspirate the remaining condensed adipose tissue. OPTION: Use the included 2.4mm emulsifier syringe to allow a more fluid adipose sample.

ADIPOSE STEM CELL PROCEDURE CHECK LIST

Fat Harvesting Prep materials	
	PK25 Adipose kit
	Sterile gloves/gown/4x4s
	Black skin marker
	Providone-Iodine/betadine swabs
	Non-sterile drapes
Sterile Fat Harvesting materials In PK25 Kit	
	1-60ml syringe, 1-30ml syringe, 2-12ml syringes
	1-30ml Vaclock syringe18G needle
	1-18G needle, 1-female to female connector
	1-Disposable 11 blade scalpel, 2-Alcohol pads
	1-fenestrated drape, 1-CSR wrap
	1-Progenikine Adipose Processing Disposable
Anesthetic & Processing materials Not in Kits	
	1%-2% Lidocaine with Epinephrine
	(optional) Sodium Bicarbonate 8.4%
	One steri-strip
	(optional) Surgical stitches, scissors, hemostat