



HACKETT HEMWALL PATTERSON
FOUNDATION

PROLOTHERAPY CLINIC ORIENTATION

We are working under Dr. David De La Mora's medical license.

DO NOT do anything risky or questionable as it can put him and the entire brigada at risk.

DRESS CODE:

- Physicians and volunteers need to wear scrubs in the clinic. Ok to have your clinic/company name/logo on it.
- Closed toe shoes while working

CLINIC FLOW:

- Be at your station before 9am (AM shift) and 1pm (PM shift) ready to inject. Your assistant/interpreter will already be present and can bring in a patient for you.
- At all times you will have an interpreter with you who will also act as your assistant. They will bring in the patient from the triage area and walk the patient out (more details of their role below).
- Do NOT leave the patient alone in the room. If you need help, have your assistant find a floater.
- The clinic manager or a volunteer will walk around and give doctors updates of how many patients are left to be seen periodically.
- Be cognizant of the time. Patients are scheduled every 45 minutes, except for spine cases which are 1 hour per patient.
- Treat only ONE body part. If a patient has 2 knees or 2 shoulders, do one complete joint and just an intra-articular on the other side.
- Do NOT tell patients to come back later in the week for another treatment. ALL appointments are pre-arranged for the entire brigada.
- If we are behind with patients, observers/floaters need to help inject (will open up back up rooms as needed).

ACCIDENTAL NEEDLE STICKS or TAINTED SOLUTION CONTACT:

- If you should get a needle stick (a needle pierces your skin anywhere on your body, including through clothing), stop the treatment.
- If tainted solution comes into contact with your mouth or eyes, stop the treatment.
- Keep the patient in the room.
- Have your assistant immediately contact the medical emergency contact physician/nurse.
- You and the patient will get blood tested using the HIV rapid antigen test, which takes about 20 mins.
- We have HIV preventive medications if you choose to take them.



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- We also have Hep C rapid antigen testing kits.

MEDICAL EMERGENCIES:

- For all medical emergencies, have your assistant immediately contact both the FLOATER and the medical emergency contact physician/nurse. You may ask for help from the assistant/interpreter or physician from your neighboring cubicle if needed.
- This includes patient complications, staff/volunteer, and physician emergencies.
- Do NOT leave the patient alone to go get help.

INJECTIONS:

- NO ribs to be injected without direct senior instructor supervision.
- Do NOT inject areas that you are not comfortable with. Have your assistant find a floater for assistance.
- Only inject medically necessary structures based on chief complaint. NEVER inject “just to learn”.
- Wear a mask while performing intra-articular injections, at a minimum. Ok to wear it at all times if you prefer. There is also protective eyewear if you would like to use it.
- No recapping of needles!
- NEVER purposely bend the needles with your hands, even if you wear gloves.
- If supplies (needles, syringes, gauze, napkins, etc) fall on the floor or touch an unsanitary surface, throw them away
- Document the visit in the progress note:
 - The top part will be completed by the church volunteers.
 - Doctors complete the physical exam and diagnosis sections on the front page, and on the back page, indicate which body parts you injected and the total volume of solution used.
 - Both doctor and assistant should print their names and sign on the bottom of the note.

AFTER EACH PATIENT:

- Doctor (NOT assistant) will dispose of needles in a sharps container.
- Dispose of medical trash in **RED** trash bins (syringes, ALL blood-tinged material, ALL gloves (non-bloody & bloody), ALL gauze (non-bloody & bloody))
- Clean your workstation (all blood tinged things in the RED trash bins).
- Wipe down the needle tray with alcohol and put down a clean paper towel on the needle tray for each patient
- Use microdacyn (hibiclens equivalent) to clean the following:
 - Hemostat, needle tray, table, marking pens
- Change sheets, blankets, pillow cases if they are visibly dirty.



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SYRINGES:

- Solution preparation:
 - Pharmacy will prepare the solutions
 - Standard 10ml syringes for 15% dextrose extra-articular injections, if you desire 5ml syringes because your hands are smaller, let the pharmacy know.
 - Standard 5ml syringes for 25% dextrose intra-articular injections
- Color code:
 - **BLACK:** 15% dextrose for extra-articular injections
 - **GREEN:** 25% dextrose for intra-articular injections
 - **YELLOW:** lidocaine for anesthesia
- Special Syringes:
 - 3ml syringes (in pharmacy, request as needed)
 - 60ml syringes (in pharmacy, request as needed). We do not have any other sizes
- Refilling syringes:
 - Have the assistant hold the 60ml filler syringe vertically with luer lock down.
 - Doctor takes the plunger out of the 10 ml or 5 ml syringe that you are using, and holds open syringe with luer lock down and lined up vertically with the refill syringe.
 - Have the assistant slowly squirt prolo solution into the barrel of the syringe that the doctor is holding. Do not overfill the syringe, leave room for plunger reinsertion.
 - Avoid syringe to syringe contact.
 - Doctor reinserts the plunger, then tilts the syringe needle up and pushes the rest of the air out of the syringe before use. Be careful of squirting prolo solution into the air/at another person or yourself, as the solution has been potentially exposed to blood from the patient.
 - Assistant can help keep track of the number of refills done and document the total prolo solution used for each patient.

JOINT ASPIRATION:

- If tapping a joint, use a 10 cc syringe - with the needle still in the joint, use a hemostat to disconnect the syringe, empty syringe into cup, reconnect syringe to needle if more fluid to aspirate. You get a clean empty 10 cc syringe from the pharmacy. We do not have the ability to do labs on the fluid.
- Alternatively, you can use a 60ml syringe (get from pharmacy), if it is a large effusion.

TRASH:



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- Put all medical trash in **RED** trash bins (syringes, ALL blood-tinged material, ALL gloves (non-bloody & bloody), ALL gauze (non-bloody & bloody))
- Put all nonmedical trash in **WHITE** trash bins (needle caps, non-bloody paper towels)
- SHARPS container: use a hemostat to remove needles and put them in the RED SHARPS container with the HUB DOWN first. If you deposit the needles sharp end first, they can accidentally catch on the edge of the bin and bounce back out since the needles have some flexibility and spring to them.

SUPPLY REFILLS

- Pharmacy staff will walk around to each room to refill the supplies as needed.
- If you need specific supplies/refills at any time, send your assistant to notify the runners who will then contact the pharmacy.

COLOR CODING UNIFORM FOR VOLUNTEERS:

- Registration staff: Pink tops/jackets
- Interpreters/assistants: Blue scrub tops
- Runners, also called Pollos: yellow Tshirts

ASSISTANTS/ INTERPRETERS:

- Wear blue scrub tops
- Attend orientation safety talk given by director of the assistants from the church, and or by HHPF service-learning coordinator
- Can NEVER touch needles or blood, or clean the patient's body area that was injected.
- Can interpret (spoken) and translate (written).
- Bring patients to the room for you and escort patients back out of the room after treatment.
- Help position the patient and make sure they are comfortable during the injections (hold patient's hand, give them squeeze balls, chat with them).
- Help obtain and set up new sheets/pillows.
- Help fill syringes using the 60ml syringe filler (see below).
- Spray alcohol or microdacyn for you.
- Communicate with the runners to get you water or call for the floater
- Help keep track of the number of syringe refills done and total solution volume injected.
- Give the patient ONE packet of Tylenol, also called acetaminophen or paracetamol and instructions to use as needed for pain and give the post-prolotherapy treatment flier, which includes Dr. David De La Mora 's contact information should the patient have any concerns or would like to request a follow up appointment (optional).

RUNNERS OR "POLLOS"



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- In the GDL clinic "Runners" are called Pollo's - because they wear yellow T-shirts! Often they do not speak English. If you want them to get something from the pharmacy, it's a good idea to write it out on a piece of paper in English.
- Pollos help patients in wheelchairs up & down stairs, run errands, can keep the correct number of patients waiting patients in the triage/waiting area

TREATING COLLEAGUES & VOLUNTEERS:

- Every person to be treated needs to officially register as a patient and get a time slot. There are no on-the-fly treatments!
- If you have a body part you'd like to treat and/or would like to be a model during the morning teaching rounds, then let the clinic director/senior instructor know ahead of time.

BRIGADA TEAM

1. GDL Brigada Clinic Director: David De La Mora
2. HHPF Service-Learning Trip Director: Kay Weeden
3. HHPF GDL Clinic Coordinator: Linh Vuong
4. Emergency contact go to person for medical emergencies: to be determined
5. Pharmacy Coordinators: Letty Estrada (Mexican nurse) & Julie Olson (HHPF USA nurse)
6. Church volunteer team point of contact:
 - a. Upstairs Patient coordinator: Alejandra de Leon "Ale"
 - b. Downstairs pt coordinator: Lety Calvillo
 - c. Food/snacks: Monica Alcalá
 - d. Linens: Anita Monteverde
 - e. Cleaning: Rosie and Clemen
 - f. Pollos (interpreters/runners): Lulu Sollis
 - g. Wall divider clinic set up team: Jorge Fernandez
 - h. General director church (after pastor) administration: Mónica Perez Gómez
 - i. Church pastor: Roberto Ramboa (wife is Barbara)
 - j. Logistics: Raúl Sotelo
 - k. Videographer/photographer: