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Evaluation Of Platelet Rich Plasma (PRP) Workflow For Clinical Improvement

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Keywords

Humans; Patient Satisfaction; Workflow; Sports Medicine; Musculoskeletal Diseases; Platelet-Rich Plasma

Abstract

The scientific evidence regarding the efficacy of platelet-rich plasma (PRP) as a treatment for certain musculoskeletal conditions is in its infancy. This project aims to evaluate patient satisfaction of the Oregon Health & Sciences University (OHSU) Sports Medicine PRP Workflow with the goal to establish the foundation for which this process may be improved. **PURPOSE:** To obtain a baseline level of patient satisfaction and improve current systems workflow which may affect patient decisions to pursue future PRP treatments.

METHODS: Three separate independent surveys were used to evaluate patient's experiences with the PRP workflow at three different time points: Consultation/Pre-PRP, Day of PRP Injection, and Post- PRP. The surveys were sent via MyChart to patients who received PRP injections from any of the OHSU Primary Care Sports Medicine physicians. Surveys were analyzed to determine what percent of patients were satisfied with various aspects of the workflow.

RESULTS: A total of 60 patients received PRP during the 14-week collection period. 55 patients met the inclusion criteria and were sent at least one survey. Notable deficiencies in the "Consultation/Pre-injection" survey showed that only 33% of respondents felt they received adequate additional patient education resources to research PRP themselves. For the "Day of PRP" survey, 87% of patients agreed or strongly agreed that scheduling PRP was easy, and 83% agreed or strongly agreed they were able to schedule within their desired timeframe. The "Post-PRP" responses show 57% were satisfied with their results, 71% felt PRP was a good value for cost, and 64% stated they would repeat the treatment and recommend it to a friend or colleague.

CONCLUSION: Following a consultation appointment, patients should be provided additional clear and reputable educational resources to research PRP on their own. An increase in ease of scheduling and physician availability and training should improve patient access to receiving PRP injections. Lastly, PRP provides mixed results, and given the out-of-pocket costs is not considered a good value by some patients. Given these findings, further research needs to be performed on PRP efficacy and the workflow systems associated with its use in various sports medicine procedures.