



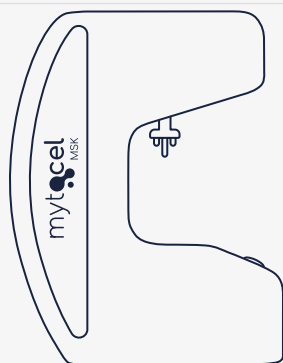
QUICK GUIDE Mytocel MSK Protocol with AMT[®] FOR OSTEOARTHRITIS

ADVANCED REGENERATIVE MEDICINE FOR MUSCULOSKELETAL HEALTH



THE ONLY PROVEN
AUTOLOGOUS
MICROGRAFTING
PROCEDURE





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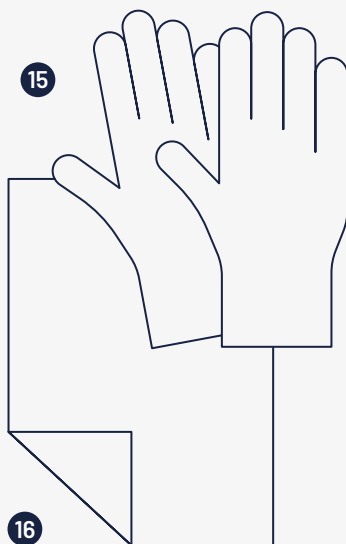


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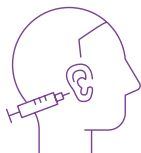
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Materials

- 1 N4SA 2.0
- 2 Rigeneracons® RS
- 3 2% aqueous chlorhexidine
- 4 2% lidocaine without vasoconstrictor
- 5 Adrenaline
- 6 Injectable physiological saline solution
- 7 Nobecutan®
- 8 3 ml syringe (for anaesthesia)
- 9 5 ml syringes (for infiltration)
- 10 30G x 1½, 0.3 x 12 mm needle
- 11 21G x 1½, 0.8 x 40 mm needle
- 12 2.5 mm dermal punch
- 13 Sterile Adson Tweezers
- 14 Round sticking plasters
- 15 Sterile gloves
- 16 Surgical drapes

Procedure^{1,2,3}

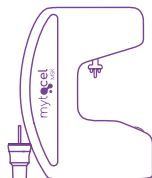
Adapted from Svolacchia F. et al., 2016; Gentile P. et al., 2017; Marcarelli M. et al., 2021



STEP 1 Preparation & Anaesthesia



STEP 2 Extraction



STEP 3 Disaggregation & Collection



STEP 4 Infiltration

STEP 1

Preparation & Anaesthesia

- **Prepare** the sterile field with all necessary materials.
- **Disinfect** the auricular concha of the ear with chlorhexidine.
- **Delimit** the work area where the biopsy will be extracted with a dermal marker.
- **Anaesthetise** with 2.5 ml of Lidocaine 2% without vasoconstrictors. Use 0.5 ml in the retroauricular nerve to anaesthetise and the rest on both sides of the auricular concha to hydroseparate the skin from the cartilage.

STEP 2

Extraction

- **Extract** 3 biopsy punches with a 2.5 mm dermal punch.
- **Separate** skin from cartilage.
- Place the 3 biopsies in the Rigeneracons® RS on the grid and rotate manually to cover them under the helix.

STEP 3

Disaggregation & Collection

- **Add** approximately **4 ml of saline solution** through the extraction hole with a Luer Slip syringe until the solution slightly embeds the biopsies.
- **Close** the cap, insert the Sicurstick in the Rigeneracons® RS, and place it into the Sicurlid and place it in the Rigenera® N4SA machine.
- **Press** the button in the machine to start disaggregation. A 6 consecutive minutes mechanical disaggregation cycle will start.
- **Cure** the patient's donor area and apply a band-aid.
- **Collect** 4 ml of the AMT® Solution with a Luer Slip syringe.

STEP 4

Infiltration

- **Disinfect** the external femorotibial compartment area with chlorhexidine.
- **Inject the AMT® Solution** with a 21G ½, 0.8x4 mm needle, into the external femorotibial compartment.
- **Mobilize** the joint to distribute the injected AMT® Solution evenly across the treated area.

VIDEO PROCEDURE



DETAILED PROTOCOL



Bibliography

1. Gentile, P., Scioli, M. G., Bielli, A., Orlandi, A., & Cervelli, V. (2017). Stem cells from human hair follicles: first mechanical isolation for immediate autologous clinical use in androgenetic alopecia and hair loss. *Stem cell investigation*, 4, 58.
2. Svolacchia, F., De Francesco, F., Trovato, L., Graziano, A., & Ferraro, G. A. (2016). An innovative regenerative treatment of scars with dermal micrografts. *Journal of cosmetic dermatology*, 15(3), 245–253.
3. Marcarelli, M., Zappia, M., Rissolio, L., Baroni, C., Astarita, C., Trovato, L., & Graziano, A. (2021). Cartilage Micrografts as a Novel Non-Invasive and Non-Arthroscopic Autograft Procedure for Knee Chondropathy: Three-Year Follow-Up Study. *Journal of Clinical Medicine*, 10(2), 322.

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