ISSCO3/MET/00/17 Subcutaneous infiltration of hands (Glove technic)

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Title

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1.1. Brief background

Pain relief is one of the major objectives in medicine; more than 80% of patients who come to the doctor do for pain. For painful conditions affecting muscle skeletal system, such as arthritis, tendinitis, post-traumatic pain, sports injuries, repetitive motion pain or improper postures at work and at home ozone infiltrations are very useful. The analgesic effect of subcutaneous administration of oxygen-ozone has been described (Ceccherelli et al., 1998).

1.2. Purpose

The purpose of this SOP is to describe the procedure of the subcutaneous infiltration on hands.

1.3. Scope

This procedure specified the infiltration technique, doses, volume of gas and frequency of application of ozone in hands.

1.4. Acronyms, abbreviations and definitions

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Meaning</th>
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<tr>
<td>MAHT</td>
<td>Mayor autohemotherapy</td>
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<tr>
<td>DQT</td>
<td>Quervain's tenosynovitis</td>
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<tr>
<td>PI</td>
<td>Peroxide index</td>
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<tr>
<td>SOP</td>
<td>Standard Operation Procedure</td>
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2. Responsibility

**Physician**

Clinical records registration  
Assessment of the indication, contraindications  
Request the informed consent (ISCO3/QAU/00/21) and the privacy consent  
Applications and monitoring  
Recording all data on medical records  
Prescription of investigations to assess the effectiveness of the treatment (e.g. microbiology)  
Reporting any late complications  
Patient follow-up
3. Procedure

3.1 Indications

This infiltration is efficient in the treatment of neuropathic pain and osteoarthritis, Quervain’s Syndrome (DQT), rizarthrosis, tendinitis, etc.

3.2 Contraindications

Sepsis of the joints
High fever
Patients that can not actively cooperate.

3.3 Recommended doses intervals

Concentrations of (5 - 20) µgN/mL with a volume of (10-40) mL. Dose: (50-200) mg / (200-800) mg of the mixture of oxygen-ozone. Infiltrate twice a week or till the pain is over (around 6 sessions). This procedure is in line with the Madrid Declaration (ISCO3/QAU/01/03).

3.4 Preliminary operations

The practitioner will be well trained in this method.
Fill all medical records of the patient, get the informed consent (ISCO3/QAU/00/21) and the privacy consent.
Make the appropriate diagnose and verify the indication and contraindication.
Prepare the appropriate dose of ozone using and adequate device (ISCO3/DEV/00/01).

3.5 Main procedure

1) Ask to the patient to put their hands on top of a cushion. Clean the top of the hands with an antiseptic.
2) Use a 20 mL syringe, needle 30 G (0.3 mm) x 13 mm and reliable ozone generator.
3) Start with low concentration such as 5-8 µg/NmL and increase gradually in every session.
4) With two fingers pinch the skin of the dorsum of the hand, insert the needle and very slowly infiltrate pushing the ozone with the other hand in the direction of the fingers.
5) In addition is recommended: a) When finish the infiltration make a massage with ozonated oil at 600 PI. b) To accompany this local application of the ozone with a systemic administration of ozone: AHT Mayor (ISCO3/MET/00/01) or Rectal insufflation (ISCO3/MET/00/23).

3.7 Frequent side effects

Local pain, Bruises.

3.8 Patients Follow-up

Check the patients once a week.

4. Contingencies; Corrective Actions

In case of bruises use a natural bases anti-inflammatory, e.g. a mixture of Traumeel® plus Thrombocid forte® 0,5% ointment (sodium polysulphate pentosan).

In case of pain reduce the speed of infiltration.

In case of other side effect follow the procedure ISCO3/CLI/00/01 "Fist Aids in ozone therapy (Inhalatory exposition and accidental over dose)" and report the side effect using ISCO3/REC/00/03 "The ISCO3 Safety Information and Adverse Event Reporting Program Form".

5. References

5.1 SOP References

ISCO3/DEV/00/01 Guidelines and Recommendations for Medical Professionals Planning to Acquire a Medical Ozone Generator.
ISCO3/CLI/00/01. Fist Aids in ozone therapy (Inhalatory exposition and accidental over dose)
ISCO3/MET/00/01 Major Autohemotherapy (MAHT)
ISCO3/MET/00/02. Rectal insufflation
ISCO3/REC/00/03 The ISCO3 Safety Information and Adverse Event Reporting Program Form.
5.2 Other References


6. Documentation and Attachments

6.1 List of recommended medical disposables

- Needle 30 G (0.3 mm) x 13 mm
- Siliconated Luer lock syringe of 20 mL
- Ozonated oil 600 PI
- Gloves and disinfectant solution

7. Change History

<table>
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<th>Significant Changes</th>
<th>Previous SOP no.</th>
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<td>Draft.</td>
<td>First version</td>
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<td>ISCO3/MET/00/17</td>
<td>3/02/2016</td>
<td>Approved version with minor corrections</td>
<td>Version 1</td>
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8. Document Records

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<tr>
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<td><strong>Authoriser / Approved</strong></td>
<td>ISCO3 Board and members 2015-2020</td>
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