

# Chronic Tendonitis Treatment Using *Tenex Health TX™* Technology

## Your Pre-operative Guide

Medically known as *Percutaneous Tenotomy* or *Percutaneous Fasciotomy*, the procedure using *Tenex Health TX™* technology combines sophisticated ultrasound imaging to pinpoint damaged tendon tissue along with the advanced *TX MicroTip™*, an instrument, which precisely breaks down and removes the damaged tissue that causes tendon pain and stimulates a healing response. This allows patients to return more quickly to their normal daily routine than with a traditional open surgery.

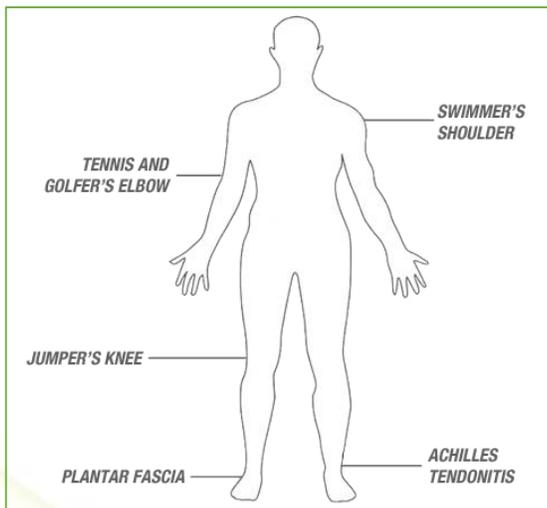
### UNDERSTANDING YOUR TENDON PAIN

Do you wonder why you experience pain every time you use your arm, leg or foot? Chronic tendon pain comes from doing the things you love or need to do—over and over and over again. **Trauma** or **repetitive motion**, no matter how ordinary, can cause small micro tears that occur each time you use your tendon resulting in **tendinosis** which is also called **tendonitis**, plantar fasciitis, runner's knee, tennis and golfer's elbow or swimmer's shoulder.

Patients often can pinpoint the source of pain that initially is treated conservatively with ice, rest, over the counter pain meds or analgesics. *Tenex Heath TX* technology is different because the

physician is able to remove the damaged tendon

tissue and thus stimulate a healing response by your body. Other approaches temporarily mask the pain but does not remove the scar tissue, which is the source pain. This procedure is commonly known as a tenotomy.



### GLOSSARY

**Repetitive Motion:** Damage to the tendon from overuse in work, exercise, or daily activities

**Trauma:** Damage to the tendon from a hit, twist, or pull on the joint

**Tendonitis:** An inflammation or irritation of a tendon that can cause pain and tenderness outside of a joint.

**Tendinosis:** Also known as chronic tendonitis, caused by tiny tears in the tendon tissue that can create pain, stiffness, or inflammation around the tendon.

This guide is not meant to be a substitute for an in-depth consultation. You should always consult with your physician who can thoroughly diagnose your condition, explain treatment options and determine if you are a candidate for this procedure. Your physician must guide you on all aspects of your procedure, including pre- and post-operative care. Individual results may vary.

## What is the difference between tendonitis and Chronic Tendon Disease?

Tendonitis is a short-term inflammation of a tendon that causes pain, while **Chronic Tendon Disease is a persistent condition characterized by degeneration of tendon tissue without inflammation.** It is caused by repetitive motions creating micro tears, or tiny breaks that require a higher level of intervention.

### The ideal candidate is someone with chronic tendon pain and the following:

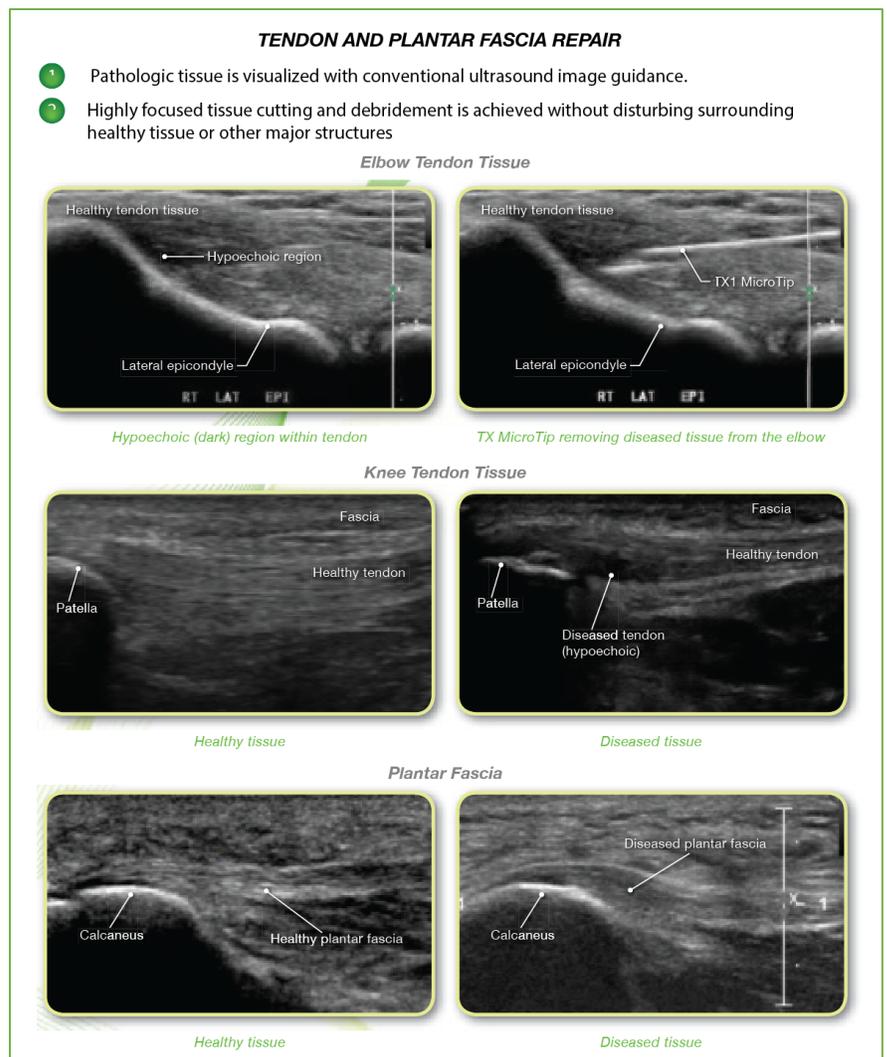
**1. You have point tenderness and have given up on certain activities** – If you can pinpoint the source of your pain and have given up your everyday activities along with your favorite ones, *Tenex Health TX* has the ability to get you back to what you love and need to do often in 6-8 weeks or less. With no stitches and typically no general anesthesia there is minimal downtime for a quicker return to normal life.

**2. You have been suffering more than 3 months** - Tendon pain is considered chronic when it has lasted at least 3 months persistently; especially if your daily activities and work are affected.

### 3. Other treatments and conservative measures has failed -

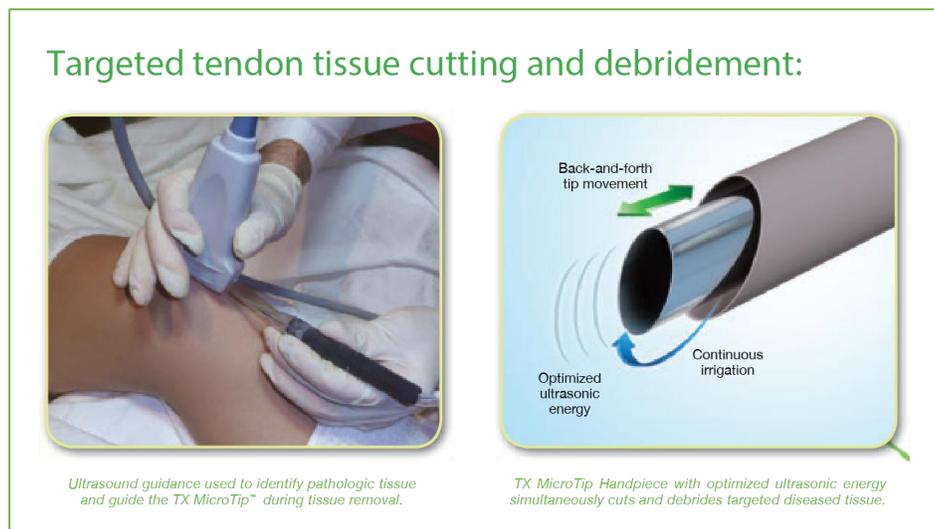
If you have already explored multiple treatments such as rest, ice and cortisone injections, you may be ready for a percutaneous tenotomy or fasciotomy procedure with the *Tenex Health TX*.

**4. The disease can be identified under ultrasound imaging** – Using ultrasound imaging, your doctor can visualize your Chronic Tendon Disease, which is the area of treatment.



## WHAT CAN YOU EXPECT FROM THE PROCEDURE?

**To begin.** Your doctor will first use ultrasound imaging, like the kind used to see babies in the womb, to visualize and identify the specific location of the damaged tendon tissue. Once the area and source of your tendon pain is identified, your doctor typically numbs the area with a local anesthetic, allowing you to stay awake the entire time. Many people say after the numbing process—which feels like a bee sting—they felt only a slight pressure during the procedure (if they felt anything at all). Your doctor then uses localized ultrasonic energy designed to incise and remove the damaged tissue. The ultrasonic energy is applied with the *TX MicroTip* instrument, which requires only a micro-incision to reach the damaged tissue. Because the incision is so small and the ultrasonic energy precisely treats only the damaged tendon tissue, the surrounding healthy tissue is left unharmed.



**When the procedure is completed.** Your doctor applies a small adhesive bandage; no stitches are required. Because most patients are awake during the procedure, many people are able to drive home immediately following your procedure. There is minimal downtime and less discomfort compared to open surgery. The recovery time is less, with a return to normal activity within 6-8 weeks or less. The speed of your recovery depends on the location of your tendinosis. Your individual results may vary, so consult with your physician.

## POST-OPERATIVE CARE AND INSTRUCTIONS

Directly after your treatment you can generally expect the following as directed by your physician:

1. Patient may drive.
2. Keep bandages and procedure area clean and dry for 3 days.
3. May apply ice for 20 minutes as needed for discomfort.
4. May take over the counter pain medication as directed by your doctor.
5. Avoid submerging area in water (i.e. Swimming/Bathing) for (5) days.
6. Rest the area that was treated.
7. Contact or return to Dr.'s office as directed.

### SPECIFIC PATIENT INSTRUCTIONS

○ Elbow	○ Knee	○ Achilles	○ Plantar Fascia
<ul style="list-style-type: none"> <li>• Rest arm and hand today.</li> <li>• Wear compressive sleeve for (3) to (5) days.</li> <li>• May resume non-repetitive sedentary use of arm/hand in (3) days.</li> <li>• Light daily activity for (3) weeks, then progress as tolerated.</li> <li>• May begin stretching and eccentric exercise at (3) weeks.</li> <li>• NO lifting objects with arm/hand greater than (5) pounds for (6)weeks.</li> <li>• May gradually resume normal use of arm/hand at (6) weeks as tolerated and subject to physician approval.</li> </ul>	<ul style="list-style-type: none"> <li>• Rest leg and foot today.</li> <li>• Use crutches or knee immobilizer if available for (5) to (7) days.</li> <li>• Start daily general non-weight bearing range of motion exercises on 3rd day.</li> <li>• Light daily activity for (3) weeks, then progress as tolerated.</li> <li>• Typically, may begin sports- specific rehabilitation from (6) to (12) weeks.</li> <li>• Activity after (3) months to be determined by physician.</li> </ul>	<ul style="list-style-type: none"> <li>• Rest foot and ankle today.</li> <li>• Wear walking boot if available and as desired for up to (2) weeks.</li> <li>• Start daily general non-weight bearing range of motion exercises on 3rd day.</li> <li>• May begin stretching exercises as tolerated at (3) weeks.</li> <li>• If asymptomatic after (6) weeks, may resume activity as tolerated, subject to physician approval.</li> </ul>	<ul style="list-style-type: none"> <li>• Rest foot and ankle today.</li> <li>• Wear walking boot if available and as instructed by your physician for up to (2) weeks.</li> <li>• Begin stretching exercises on the 3rd day.</li> <li>• If asymptomatic after (6) weeks, may resume activity as tolerated, subject to physician approval.</li> </ul>

#### Contact the office:

- If area becomes Red or hot to touch
- For increased pain or swelling
- For drainage from site

#### Additional Physician Instructions:

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Contact: \_\_\_\_\_

Physician Name, Title  
 Facility  
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