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Board Certified in Foot and Ankle Surgery, American Board of Podiatric surgery
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Lori Paserchia, MD
Lead Medical Officer
National Coverage Analysis

5/22/03

Dear Dr. Paserchia,

I am writing this letter regarding blood product treatments, and the need for information regarding coverage. I have been using autologous platelet grafting with Harvest Technology Smart Prep system for more than one year. The clinical results have been terrific, and I have photographic evidence to prove it.

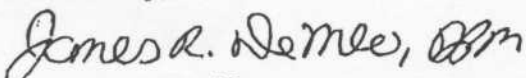
The autologous platelet system that Harvest has developed has been extremely effective in healing my most difficult wounds, including those with diabetes that have had multiple different treatment modalities that failed. I have encountered patients that have undergone hyperbaric oxygen therapy, skin substitute treatments and custom braces over several months, all yielding poor results. With autologous platelet grafting I have been able to close these wounds quickly and economically. I perform the technique in my office, and usually obtain complete wound closure with 2-3 treatments costing about \$1,800.00, in 30 days.

Autologous platelet grafting should not be associated with platelet-derived growth factor, such as Procuren, and should therefore not be put in the same classification. Procuren, as you know, is a growth factor releasate with no platelets, white cells, fibrinogen, or other proteins other than already released growth factors. They are two very different products.

I have also used autologous platelet grafting in other surgical procedures such as repair of non-unions of osteotomy sites or fractures, as well as an adjunct in primary fusions to accelerate the fusion process. The use of autologus platelet grafting for these purposes is well documented in the literature.

Thank you for your time and consideration in this matter. Please contact me if I can provide any other information.

Fraternally,


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