# TREATMENT NOTE TEMPLATE/EMR (Knee) Smart Tip 2190



(This document includes suggested language that can be used as a guide to supplement your own EMR documentation.)

| PRO  | Ultrasound Right Left Bilateral of lower extremity from groin to mid-calf to localize the relevant peripheral nerves suppyling sensation to the anterior knee.  Destruction by neurolytic agent (iovera° cryoneurolysis) Right Left Bilateral knee peripheral nerves under ultrasound guidance.  |  |  |  |  |  |
|------|--|--|--|--|--|--|
| PRIC | History and physical/applicable labs reviewed.  Yes No Identify changes and contraindications.  Yes No Details of the procedure including the risk, benefits, alternatives to treatment, and possible complications were reviewed with patient. Yes No Informed written consent was obtained. Yes No   |  |  |  |  |  |
|      | GHT KNEE         LEFT KNEE           re-treatment pain score:         0 1 2 3 4 5 6 7 8 9 10           User the pain score in the pain |  |  |  |  |  |
|      | Patient was placed in supine position.  Target Nerves were identified using:  Anatomical Landmarks Ultrasound Nerve Stimulator  The patient's leg was positioned:  Flat Wedge  |  |  |  |  |  |
|      | A mark was made [_mm] proximal to the medial pole of the patella on the mid-thigh to mark a starting point for ultrasound scanning.  |  |  |  |  |  |
|      | Ultrasound guidance was then used to confirm the location of the peripheral nerves responsible for anterior knee innervation and their location was marked on the overlying skin.  |  |  |  |  |  |
|      | After the nerves are located a skin indentation is made with a blunt object to mark the needle insertion site.   |  |  |  |  |  |
|      | Patient's skin was shaved if necessary.  |  |  |  |  |  |
|      | Patient's skin was cleansed using [Antiseptic] on the [Treatment Areas].   |  |  |  |  |  |
|      | The skin insertion site was anesthetized using [Topical Anesthetic].   |  |  |  |  |  |
|      | A skin wheel was created at each treatment site with [Needle Type] and infiltrated approximately [Amount/Type of Anesthetic].  |  |  |  |  |  |
|      | [Needle Type] was used to enlarge the treatment insertion site on the skin.  |  |  |  |  |  |
|      | Using ultrasound guidance, infiltrated approximately [Amount/Type of Anesthetic] using a [Needle Type] to area of the nerve being treated.   |  |  |  |  |  |

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|-------------------------------|---|--|--|------------------------------|
| Zone of influence             | Nerve                                     | Nerve depth on ultrasound  | Thigh level<br>measured                              | Number of times site treated |
| Proximal medial<br>knee pain  |   |  |  |                              |
| Anterior knee pain            |   |  |  |                              |
| Proximal lateral<br>knee pain |   |  |  |                              |
| Distal medial<br>knee pain    |   |  |  |                              |
| Distal lateral<br>knee pain   |   |  |  |                              |
| eft Knee Treatment            |   |  |  |                              |
| Zone of influence             | Nerve                                     | Nerve depth on ultrasound  | Thigh level measured                                 | Number of times site treated |
| Proximal medial<br>knee pain  |   |  |  |                              |
| Anterior knee pain            |   |  |  |                              |
| Proximal lateral<br>knee pain |   |  |  |                              |
| Distal medial<br>knee pain    |   |  |  |                              |
| Distal lateral<br>knee pain   |   |  |  |                              |
| Patient's skin wo             | as cleansed and the<br>ed procedure [Desc | t, the cryoneurolysis<br>e treatment site wa<br>ription of how the p<br>d and mobilize the k | s covered with a<br>atient tolerated t<br>nee joint. | bandage.<br>he procedure].   |
| The patient was               |   | ned and discharge i  | instructions given                                   | to the patient.              |

The iovera° system is used to destroy tissue during surgical procedures by applying freezing cold. It can also be used to produce lesions in peripheral nervous tissue by the application of cold to the selected site for the blocking of pain. It is also indicated for the relief of pain and symptoms associated with osteoarthritis of the knee for up to 90 days. The iovera° system is not indicated for treatment of central nervous

When stimulation compatible components are used, the iovera° system can also facilitate target nerve location by conducting electrical nerve stimulation from a compatible 3rd party nerve stimulator.

# Important Safety Information

# Contraindications

The iovera° system is contraindicated for use in patients with the following:

· Cryoglobulinemia, paroxysmal cold hemoglobinuria, cold urticaria, Raynaud's disease, and open and/or infected wounds at or near the treatment site

As with any surgical treatment that uses needle-based therapy and local anesthesia, there is a potential for site-specific reactions, including, but not limited to:

• Ecchymosis, edema, erythema, local pain and/or tenderness, and localized dysesthesia

Proper use of the device as described in the User Guide can help reduce or prevent the following complications:

- · At the treatment site(s): injury to the skin related to application of cold or heat, hyper- or hypopigmentation, and skin dimpling
- Outside the treatment site(s): loss of motor function

