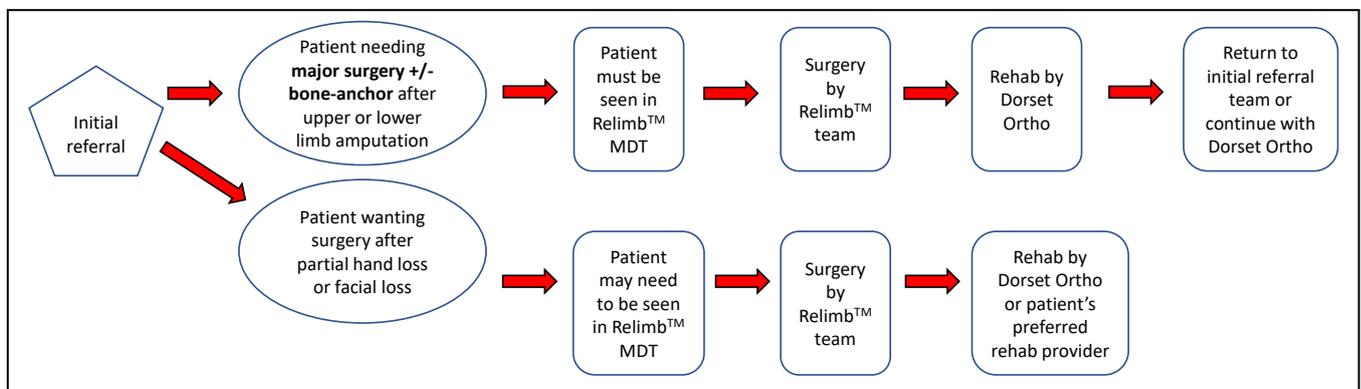


## The Patient Pathway for Treatment by the Relimb™ Team

The loss of any body part is hugely traumatic. Having a simplified pathway to access surgical treatments that may help to address your own or your patient's emotional, functional, and cosmetic concerns may help to alleviate some of the anxieties about what happens next.

At Relimb, we aim to provide our patients with a one-stop shop where they can access the majority of the surgical (and some non-surgical) treatments that may be needed by those who have suffered limb loss, partial hand-loss or loss of part of their face. Our solutions may involve either bony or soft-tissue surgery and/or may be combined with the use of osseointegrated bone-anchors.

The pathway to access treatment is simple:



Relimb's rehabilitation partner for patients undergoing surgery after major limb loss is Dorset Orthopaedic. We work with Dorset Orthopaedic because we have the confidence that they will follow our expected pathway for rehabilitation of our patients, especially when they undergo treatment with an osseointegrated bone-anchor. This confidence is born from many years of consistently good outcomes that we have observed from Relimb™ patients that have been treated by Dorset Orthopaedic.

Relimb™ welcome referrals from any source in the United Kingdom, and elsewhere. Patients often develop strong bonds with their rehabilitation providers and most of our referrals come from the rehabilitation community. Therefore, we welcome having the patient's preferred therapist, prosthetist, case-manager, or solicitor attending our clinics with the patient - especially in the Relimb™ MDT clinics. At the clinic, the patient will have the opportunity to meet with other members of the Relimb™ team including our own rehabilitation partners (Dorset Orthopaedic), our psychologist and our anaesthetist. They will provide an independent opinion of the patient's suitability for the proposed treatment.

Relimb are often asked if there are any "rules" or "specific indications and contraindications" for referral. The simple answer is that we cannot know for certain what we may or may not be able to offer your patient until we meet them, face-to-face. We often find that patients are referred for consideration of osseointegration surgery, but we then discover that they have a host of other conditions which can be treated

which have been entirely overlooked by their referring team. As plastic surgeons with access to a host of reconstructive procedures and experts, there are many (often unexpected) treatments that we can employ to improve the quality of life of your patient. That said, there are several distinct categories of patients that may struggle to get the best out of our treatments. These include:

- 1) Smokers or patients who take nicotine from any source on a regular basis and who are unwilling to stop smoking
- 2) Patients who are taking long-term immunosuppressive medications (e.g. steroids, methotrexate, anti-TNF agents)
- 3) Patients who are very obese (BMI > 35)

If a patient decides to undergo surgery which includes the use of an osseointegrated bone-anchor their initial rehab will be carried out by Dorset Orthopaedic. This must continue until the patient is fully weight-bearing through their implant and prosthesis, typically at least 3 months following surgery. As part of their role in the Relimb™ MDT process, Dorset Orthopaedic will also need to make an independent assessment of the suitability of the patient for any planned surgery in terms of their pre-op fitness and the patients' goals for prosthetic reconstruction. Once the initial rehabilitation phase is completed, the patient is then free to return to their original rehabilitation provider.

After surgery, patients will be asked to return for regular review by the Relimb™ team, especially if they have had an osseointegrated bone-anchor inserted. Patients who have undergone this treatment will be asked to return for review at 3 months and 12 months after surgery. The 12-month review will also include repeat plain x-rays, CT-scans and a DEXA scan to monitor the progress of osseointegration of the implant. Additional visits may be needed depending on the individual.

Finally, patients often ask if the cost of their initial consultation can be covered by standard health insurance (e.g. BUPA, AXA etc...). Unfortunately, the nature of the surgical treatments provided by Relimb™ is such that this is not possible because these treatments lie outside the currently recognised insurance codes. Therefore, you will be expected to fund any consultations through your own means.