



Pre-Treatment

- **Ice:** if edema/swelling present, ice for 15-20 minutes, then allow 15 minutes prior to Tx.
- **Clip:** use **#10** blade when necessary over limb (*unless sale/show*)
- **Clean:** use soap & water to remove dust, dirt, debris.
- Sedation is usually **not** required

DO NOT:

- **Ride horse unless instructed by Vet**
- **Give injections or use adjunctively, unless by Vet**
- **Expect 100% resolution after a few treatments**

Pre-Performance

Light Energy absorbed into potential problem areas for strength and functional performance.

Minimizes muscle damage and oxidative stress developed during activity for a faster recovery.

Reduces risk of injury, provides relief from soreness by safely and legally delivering light energy to promote blood flow.

Acute

Acute = injury that occurred 11 days or earlier.

Acute conditions require less time/Tx and show greatest success. Start Tx within 11 days of injury to reduce inflammation and pain while preventing scar tissue formation.

ICE FIRST! Increased lymphatic drainage removes fluids allowing deeper light penetration

Chronic

Chronic = injury that is recurrent and/or older.

Objectives:

- Reduce inflammation & pain
- Regenerate and remodel tissue
- Remove or reduce fibrosis
- Align collagen fibers
- Provide a quality heal

Maintenance

Post-performance, off-/pre-season.

- Supports prep work prior to season
- Provides healthy bloodflow and potential anti-inflammatory response
- Helps sustain or increase tensile strength and elasticity in tendon and ligament fibers
- Encourages continued repair of previous injury and remodeling fibrous tissue, and continued alignment of collagen fibers

All Contact, All The Time. Warm is good, Hot is Not.

3 Consecutive Treatments
prior to showing/performance.

6-10 Treatments Consecutive or EOD
then evaluate.

2-3 Treatments per week, 24-36 Total
3 days consecutive if lame, then EOD

12-15 Treatments or as needed

Stay in "the Know"

Join
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for DVMs,
Technicians, and Staff

Post Treatment

1st 30 Days Post (daily)

- Bandage/wrap for support and warming
- Quiet walking 15-30 minutes
- Spray area with hose using cold water
- Standing bandage

60 Days Post RLT (daily)

- Bandage
- Walk 5 minutes
- Trot 5-10 minutes
- Walk 5-10 minutes
- Spray area with hose using cold water
- Standing bandage

DO NOT apply ice post-RLT, same day

Need Help?

Technical Support
(800) 819-5538
techsupport@soundvet.com

Applications Support
RJ Poston: (760) 560-8381
rj.poston@soundvet.com



What is Regenerative Laser Therapy (RLT)?

RLT is **safe, non-invasive light** delivered in **energetic pulses** that penetrate deep into the tissue, creating a **photo-acoustic** wave that has been shown to **regenerate tissue, re-align fibers, reduce scar tissue**, and provide **comfort to horses**.

- Removes/Reduces Scar Tissue
- Regenerates Tendons & Ligaments
- Restores & Repairs Fiber Alignment
- Provides Pain Relief
- Reduces Inflammation
- Antimicrobial, Heals Wounds
- Soothing Sensation
- Head-to-Hoof Maladies
- State-of-the-Art Technology

What to Expect

- **Be patient**; the aim is for **long-term, quality repair**, not a band-aid.
- **Very safe and legal** to use, operated by vet techs, soothing to the patient.
- 6-10 treatments for **Acute** cases
- 2-3 treatments /week for **Chronic** cases, 24 -36 total
- 1-3 treatments for **Pre-/Post-Performance**
- Similar to prescriptions of antibiotics, you don't stop after 2 Tx if you 'think' your horse is feeling better.

Safety & Contraindications

- **ALWAYS** wear safety glasses from SOUND®
- **NEVER** shine laser into the eye
- Observers, grooms, owners should all wear safety glasses within and around the treatment area.
- **DO NOT** treat over known malignancy
- **DO NOT** treat over gravid uterus, pregnancy
- Contraindicated for use **within 30 days after injection of corticosteroids**.
- **Treating over injection sites** may cause pain/tenderness/inflammation at site. Wait at least 1 week post-injection.

Successfully Treated Conditions

- Suspensory Ligaments
- Suspensory Branches
- Proximal Suspensories
- Hind Suspensories
- Superficial Flexor Tendons
- Deep Flexor Tendons
- Inferior Check Ligaments
- Superior Check Ligaments
- Collateral Ligaments
- Summer Sores and Scratches
- Tears and Core Lesions
- Scar issue, fibrosis
- Cellulitis, Thrombosis
- Lymphangitis in the Foot
- Frog and Heel Bulbs
- Hocks and Fetlocks
- Necks and Backs
- Sacroiliac
- Kissing Spines
- Open Wounds/Punctures
- Burns
- Sub-dermal Infections
- Post-Operative Incisions
- and much more!

Adjunctive Use

- **PRP:** RLT is recommended 2 weeks prior to injection date, then 2 weeks post injection. The benefits of injecting a high concentration of autologous platelets come from their release of growth factors and cytokines that can stimulate healing of a variety of tissues. All of the "good stuff" in platelets is encapsulated in granules, so if an external source can increase the probability of degranulation, this effect can be enhanced.
- **Stem Cell:** RLT is recommended 2 weeks prior to date of injection, then 2-3 weeks post injection, after stem cells have stabilized. Stem cell therapy consists of inserting non-differentiated cells into an area of tissue damage, and waiting for the local physiological environment (pH, nutrient content, etc.) to trigger the differentiation of these cells into the type necessary for the overall rebuilding of that tissue. For the injection of stem cells to have a biological effect, these cells need to metabolize and divide INSIDE the tissue you are trying to rebuild. Adding RLT to post-injection sites can speed up this metabolism and further healing.
- **IRAP:** RLT is recommended for daily use for 7-10 days prior to injection to reduce inflammation, and allow IRAP therapy to be more effective on more severe OA. RLT treatment can be applied immediately following IRAP to promote healing.
- **Shockwave:** RLT is recommended for use 7 days post-Shockwave. The rationale is to improve the environment where fibroblasts are present (pH balance, temperature, decrease free radicals, reduce of toxicity within the cells when present.) This process allows tissue regeneration through fibroblast differentiation.