

O-Shot® Procedure

Supplies List

The part numbers in the following list refer to those in McGuff's catalogue. We get no kickbacks from them, and if you can find something equivalent for a good price/service from another supplier, go for it. But their catalog will give you a reference, and they do provide good service most of the time.

McGuff Compounding Pharmacy & Supplies
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- A centrifuge that is FDA-cleared. Using a centrifuge that is approved for lab testing only can lead to serum sickness, fever, and infection. There is enough profit built into these procedures to order premium supplies and still do very, very well. If you use a kit that is FDA approved, it makes it much easier for your colleagues in the CMA to help you with expert witness, etc. We have only had to do this once in 16 years, but because we all follow the same protocol and use an FDA-approved kit, a board-certified urologist was able to go to court and say, "This doctor follows the same protocol I follow and there is absolutely no way that the procedure caused this complication." [It was an infection 4 weeks after a P-Shot® procedure at a site distal from the injection—in the scrotum, not the penis. The man told the ER doctor he had shaved his scrotum 3 days before. And he was an IV drug abuser. But his attorney took it to court. Because of the power of following a standard protocol and using an FDA-cleared device on our recommended list, the expert said, No way, and the jury ruled in favor of our provider in only a few minutes. Please do not skimp on the centrifuge. I recommend you start with the kits from RegenLabUSA.com
- 1ml Syringe; Luer Lock (REF 309628). Tempting to use one without the Luer Lock, but you need it for transfers, and without it, the hydrostatic pressure when you inject will blow the needle off of the syringe, and rather than provide your patient with an O-Shot® procedure, you will give her a PRP bath.
- 5ml Syringe; Luer Lock (REF 26230)
- If you use a double-spin centrifuge, you will need other syringes as per the instructions with that kit. If you use the Regen Kit I recommend, or Selphyl kits, you will not need more syringes.
- 18G x 1 ½ inch needles (REF 305196). I prefer the BD brand (you just use this to get the PRP out of the tube after centrifuging).
- 27G x 1 ¼ inch needles (REF 305136). These are used to inject the anterior wall of the

vagina. You need the length even though the injection depth is shallow. If you are not sure why you need the length, that is covered in the how-to-do videos and in the frequently asked questions section of the membership website.

- 30G x ½ inch needles; (REF 305106) BD brand
- Luer Lock Connectors-Braun Fluid Dispensing Connector. (REF 415080) Product code: FDC1000. These only cost about 30 cents each, but they are critical for doing the procedure. Buy many of them and stay well supplied. I have run out before with a patient in the room, and it is very frustrating.
- For phlebotomy:
 - BD Vacutainer safety lock 21G x ¾" x 12" Lot 5J2621
 - Butterfly needles- Terumo brand 18G x ¾" (REF SV*18BLK)
- Gloves-Nitrile Powder Free 2nd skin made by Top Quality. My favorites, but whatever you prefer. Amazon has these for a good price.
- Gauze-Med-Pak Performance Gauze Sponges McKesson 4"x4", 12 Ply QTY 200
- Alcohol Wipes-McKesson Alcohol Prep Pads 200 single use 1.2"x2.6"
- BD Sharps Collector -3.3 Quart (REF 305488)
- Calcium Chloride or Calcium Gluconate 10%. Oddly, this salt water can sometimes be the most troublesome of everything on the list. A local compounding pharmacy can make it. Also, you can order from Mr. Crash Cart Syringe Item# SP13240S7161- Order. PH: 800.858.9592.
- 30% lidocaine ointment. For most women, this is all you need for complete anesthesia of the clitoris. The basis BLT cream (70/30/30, Benzocaine, Lidocaine, Tetracaine) does not work as well. A very small amount is all you need—less than ¼ a teaspoon—to coat the clitoris. You can put a similar amount on the anterior wall of the vagina for good luck (I usually do), but there is little sensation there, and (unless you go too deep and touch the urethra) your patient will have no pain with injection of this area without a topical anesthetic.
- 2% lidocaine, withOUT epinephrine. Even though 30% of lidocaine will provide a pain-free O-Shot® procedure 99% of the time, a woman will occasionally still need the block (as demonstrated by Sophia Lubin, MD, FACOG, in one of the videos). For that, you need the injectable lidocaine, but I no longer use this most of the time.
- Head Lamp. I think I can see better with these than with an adjustable goose-neck lamp. And it feels cleaner to me: I never touch patient, adjust lamp, touch patient again. And, I put the lamp on my head, turn it on, THEN put on my gloves. Do the procedure, take off

the gloves, THEN take of the lamp. Here's [an example on Amazon that works](#)<-

- Lots of extra batteries for your headlamp.
- Juvederm Ultra Plus XC 1ml with lidocaine. Or your favorite HA filler of similar quality.
This only for the Vampire Wing Lift® procedure. Never to be put in the anterior vaginal wall or the clitoris—NEVER.
- 25 gauge, 1 ¼ inch needle. For injecting the labia majora for the Vampire Wing Lift® procedure. This is not used for the O-Shot® procedure.
- Panty wipes. These are for after the procedure, before the woman dresses. Sometimes, women will have local irritation from the numbing cream, and this can help.
- Panty liners. You did do an injection into a very vascular space. So, commonly, a few drops of blood will ooze from the injection site as the woman travels home. This being expected, giving her a panty liner both saves her clothing and serves to remind her of the normality of the phenomenon—saving you another phone call to you and worry for her.