PRP, usually 500 to 2,500, there's the cost of the kits and whatnot. It's a good technology, but it's old, because think about it, really, the PRT causes the inflammation.

That's why they say you can't take ibuprofen aspirin, whatnot, which brings in the stem cells which secrete your old exosomes, Which does the reprogramming that allows the niche or the organ or joint to regenerate.

But why have the STEM cells in inflammation? You know, I just treated a stroke patient. She had a stoke three years, two and a half years ago. And she did an IT band just because she knew a guy and he did the PRP and it caused it to light up really bad after the inflammation.

It was only X stones that got her back to running three miles a day again. So sometimes the information is a double-edged sword, right? Hey there. Welcome to the Recharged Biomedical Podcast.

I'm Dr. Edward Park. And if you're curious about regenerative medicine, you've come to We're diving into the latest breakthroughs in telomeres activation, stem cell exosomes, and all the cutting edge science that's shaping the future of healing and longevity.

Let's get started. Hi, everybody. This is Dr. Ed Park, the host of the Recharged Biomedical Podcast and also the spokesperson for the online training course.

A lot of interesting things happening today. I got Claude to reorganize the course, looks much more pretty and engaging. So if you're interested in that, sign up is at rechargebiomedical.com slash masterclass.

So today is a very important topic. What should we charge? And it's a complex one and there's no easy answer. The lady above me is my mom. She's degenerate gambler with slot machines and this is her coming back from a hand pay.

But even that mom who's gotten well over 40 something injections has to pay and depending on my current thoughts about my upbringing, it could be more or less depending.

So what is money? You know, many years ago, 18 years, ago I partnered with the Tea Sciences Corporation. They paid a lot of money to this guy, Clotaire Ropie, who is an anthropologist.

And he said that in the American psyche, money is proof, right? So Jerry Maguire says, show me the money, is show the proof. So whether or not you like Elon Musk or his politics, there's proof that he has done something because he's ostensibly the richest man in the world on paper.

Now, some people say time is money. Certainly a lot of people, Gen Z, millennials, are mad about trading their lives for pittance of money, that's where we are currently.

Energy is also time and money and it's also a trust factor, right? So it kind of is complex, but we have to stay viable. We don't have be billionaires, we need to be sustainable, so we Now, my disclaimer is that exosomes are not FDA approved for the treatment or prevention of disease.

And in fact, if you go on the website, only topical products are listed for Chimera Labs. There's a reason for that because everything we're doing is based on science and largely anecdotally from our experience of over 3,800 procedures safe.

But we need to always understand that we're not promulgating or promoting this for non-FDA approved reasons. That said, it can have miraculous results in certain cases, if not most.

Master class participants, if you join my online master class, you can purchase Exosomes through me. I am one of the few distributors for Chimera and your price will be the same as buying directly from them.

If you are an existing Chimaera customer, they will allow you to take the course and recoup up to $3,000 worth of course, and then resume your ordering as previous.

So it ships directly from Chimera, not from me, and with a COA at overnight the next day before noon. I'm not intending to advertise Exosomes, I want to just explain to you my approach to pricing.

And keep in mind that over the years, probably there's been 80% churn in the accounts of this original founding lab. 10 years ago, they started making ExoSomes when no one else was, when Sarah joined to help found the company.

There are many companies, some have come, Some have gone. Some are just white label distributors, but they all make claims that they can give you four times the exosomes for half the price.

Keep in mind that I've done many lectures on this topic because of Abby's limit of light, which is 200 nanometers. You cannot see exisomes. you can do different tricks to radio label them, But if we're really being honest, nobody can count the number of exesomes in the product.

So it's a process. No one's been doing it longer than Chimera Labs. Now in the bottom left, you see this is Exosomes Masterclass little watermark. These are adapted, but all this content is on the online course as are many other things.

So I'm going to redact the actual pricing. This is the current pricing, which has been quite stable. And we need to remember that we're not comparing apples and oranges when other products are involved.

So just take that out of your mind. The wholesale costs here, the product line or the shopkeeping units are mainly for Luxier regular and Luxir triple concentrated.

The math is the math. About two years ago they went to a system of micro vesicles, which is technically correct, but of course not all particles are exosomes.

Quite a few of them are just debris and the nano site or NTA, nano tracking analysis machines, just track those. So they have a pretty good handle on what it is based on their previous product.

I came up with a number roughly 1.4 billion per cc and the math is what I use for my own internal record keeping. You see that if you buy one to five units it's a different price six to fourteen and then fifteen plus the lowest possible price.

And last year they launched Kiara, which is a conditioned media product. So it's everything, the so-called secretome in the culture. There could be some benefits, there could some other stuff that's not exosomes in there.

That's really not a suitable product for anything but topical in my opinion. So what are you going to charge? What I see, what I do is roughly two times wholesale.

I think that's reasonable. You have malpractice, I have about 13,000 malprice. We have staff, we have supplies, overhead like rent, and we our time and our risks.

So that you should make something in most cases. The buy in bulk, of course, gives you a discount. And for the first three, four years, I didn't have a minus 80 freezer and they do just fine.

Internal studies say only about 5% loss of potency in a regular freezer for up to a year. The old joke is, well, we make money on every sale, but we makeup for it in volume.

This is not, it's actually a standard economic thing called dumping right back in the seventies. Japanese would sell TVs below cost so they could dominate the market.

It's rational and anthropic. The company that I appeared today for a net valuation about $1.5 trillion has never made a profit and nor does it. For every dollar it spends 58 cents or whatever the math is, it's losing money hand over fist.

But we are not anthropic, we're just individuals. So again, two times cost is reasonable. If they're buying a second or a third vial, of course you want to probably reduce the cost of the second and third value if that's what suits you.

As far as multiple sites, the hand on the door is quite real. Just you finish treating someone's shoulder and knee and they go, oh doc, you know what?

I got plantar fasciitis. So we have that conversation. I do treat multiple areas. It's not that the procedures are harder. There is more setup. You got to keep it sterile, but it's definitely doable.

I generally don't like to do more than five or six sites at a time, because I think the body can only handle so much homework probably at once. If it is going to deploy these stem cells and their exosomes and all this healing, it probably can't do 12 sites.

But who knows? That's maybe more of a systemic thing. And of course, people that have been with me for many years and over half my patients are repeat.

We do consider reducing our margin for loyalty. And if they bring their wife and their kid, sure, that's a good feeling all around to cut the pricing a bit.

So how much do we really need? In the early days, the first year or two, I would use very small amounts, one to two billion. And like the old grill cream that the Gen Xers and Boomers will remember, their ad was, a little dab will do ya.

Sometimes a lil' dab WILL do you. Now, when would I use the minimum, like one mil of a single concentrate? You know, maybe if you had like a singular nodule that's causing a trigger finger or a singe knuckle, that might be sufficient.

But again, I caution you that the effects are not exactly linearly proportional to how much you use. In the last couple of years since, you know, pandemic, actually became quite fond of the one milliliter triple because it's highly concentrated.

So that's great for nasal. It's good for joints, which don't usually like a lot of volume. That's kind of been the workhorse now for my practice. But I always tell people, you know, can't remodel a house in a day.

The expectation management is super important as we discuss in our whole lecture and a whole module in the course. So kind of keep the people happy. I was just in Hawaii and I had dinner with a friend and he knew this person that I referring to.

And anyway, the bottom line is I did his shoulder. He said it's 25% better and got mad and bad mouthed me to all his friends and my friends in patients and that was Kind of a thing that I should have managed better I shouldn't said well if it gets better Which I do now then consider repeat because you're not as the brake pad above shows if you drive off the law with a 10 millimeter brake Pad and you Drive into my office with the 1 millimeter or bone-on-bone arthritis I ain't taking it to 10 millimeters one shot your pain might get better and it might look better even on on imaging But you got to do multiple, multiple shots.

And the only person who's actually ever heeded that was a friend of mine in Hawaii who he was getting friends and family pricing and he went four times after the pain had disappeared.

Now compare and contrast that with someone who was wiser than I was and even more experienced than was when I first started eight years ago. BH was up a pilot and had horrible rotator cuff problems.

Injected him. He got 50% better and I apologized to him and he said why it worked I go. What do you mean? You're not all the way better He said I want to just come back one more time and that's what he did and what happened So he's been a hundred percent since so the key is don't over promise manage expectations tell them Hey, if it's the same or worse, don"t do it.

But if he gets better, you might want a repeat And that way they, they have a better trust, right? And you can have long-term relationship. I mean, majority of my patients are people who used to have bad shoulders or knees or whatever back.

Dave Asprey had an issue with his back and now they're fine and they want other stuff done. So it's all about keeping those margins reasonable because people will price shop.

And if you're two X, which other people are charging with the same product, that ain't no good. Of course, being young and acute injury, the best scenario.

And so this is a picture of doctors, I don't know, off the internet. Now, some physicians have different models. It's just me in six states flying around with my backpack and ice chest.

So my margin is little less. I have the wonderful Denise helping me every day in Manila. But some people have a large deployment of PAs and nurse practitioners, et cetera.

that are doing some cosmetic stuff. So that's reasonable. You can charge a lower margin. We interviewed last week, Paul Tai, who had 135 patients in the office every day and he had eight or 10 nurses seeing them.

That's a different kind of model, right? But every one of my patients gets my cell phone number. They can call me anytime. And so it's like a concierge care without the yearly subscription, right?

And it is luckily the complications, the complaints are very rare, less than 1% as we've documented in different podcasts. And again, as I say, I don't find multiple sites technically more difficult to keep sterile.

It's just I need to know because they do add time and risk. So what does this mean? I don't divide the fees, only the production costs. Yeah. I mean, that's what I'm saying.

Don't charge for the shoulder and the knee and that SI joint. We just charge. So above me, this girl's trying to put ping pong balls into goldfish bowls and good luck with that, right?

We've all been there. Whereas the other girl is standing above the rim and probably is going to make two points with their slam dunk. So clinical skills, you know, over the years I've done probably 10 trans tympanic.

I don't love it, I'm not trained in it. It's doable, but again, it's not something that I really go out of my way to do. I'm in contrast introperitoneal now i'm trying to do shoulder epidural some people balk at and i don't blame them but it's not that hard to.

The important thing is course sterility and going careful nasal i just went over a thousand treatments of nasal ivy knee shoulders all that's covered in the online course with one sheets.

step-by-step setup, what you'll need, and video demo. But don't do anything just for the money if you really don' have the skills, right? That's just common sense.

So, if your specialized, like let's say you are an ENT and you're gonna treat tinnitus, hey man, that's awesome, I'll refer all the patients to you. For me, it's a practice of medicine, you practice, get better, practice never makes perfect.

It makes it permanent. Anyway, so this is my trip to Hawaii, just two of the four patients. I just, in the last minute, scheduled it. You can see that I have this note-keeping scheme, which you're happy to copy on Google Sheets.

So what it says, you don't see it's redacted the name and the patient number, but the patients number appears next to the date of treatment. This patient was my 29th patient ever.

And this is the dot fourth encounter, dot first procedure of this encounter. So this person had five procedures. It was an epidural, a nasal, both sides.

This is a counting error. I do both sizes, but I only counted one treatment. I did the left knee, I do the right knee. See, there's a column for laterality and then finally IV.

And so, yeah, he paid a lot, but then he got a lotta different treatments. He was complaining to me how he's recommended to so many people because it's helped him with his back pain and yada, yadda.

It's hard sell. Most people don't go by the referral of another person and they go buy who's got influencer points or is famous and on the Joe Rogan show, yes.

So then the next person was J. H., my most recent new patient. She's patient 770.1. And you can see that we're up to 3,800 procedures, 1,500 encounters, and 775 distinct patients.

So she ended up getting an epidural and both knees. What do we have above us is the May Day Parade celebrating the Chinese Communist Revolution. These actually are wearing hanbok, so this is probably North Korea, or maybe it's China, I don't know.

But there's a saying in the parlance of red flags, right? Guys are walking red flag. So you gotta know people sometimes are not worth working with. I had one patient who claimed to be a big fan of mine watching all the videos, came in with his girlfriend.

Set all you have an age and which is fine i'm i never said call me and it's fine but he said out loud i wish i i was i can use my to buy a used car. So we ran his car didn't go he's providing another one lost or he didn' but we did twelve sites with eighteen billion three triple strength whatever.

It's so close and his girlfriend got treated too in two sites and this would have been a 7,500 street value and he ghosted me. And it's not just people who want to buy a used Civic.

I have one patient who has houses in Berlin and Dubai, Haiti and Bitcoin, and she also ghost with me after a half payment. So be aware of people view you as a technician who can be jilted or Short shifted so that's the b cluster antisocial borderline narcissistic histrionic you can smell them out of the way watch out and also be aware of people with body dysmorphia right they just turning turn into new procedures and sometimes.

It's just their spirit that allows them to not be happy with anything so don't get involved with such people if you could help it. So loyalty is a two-way street, right?

But never do a quid pro quo. This is illegal, so lawyers can pay you for leads, doctors cannot, not even to other doctors. They can't even refer to their own surgery center or radiology suite.

So never formalize some kind of thing. You're flexible with pricing, but never, never say to somebody, oh, you bring me a patient, I'll give you 15% off.

In contrast, what's not illegal is that if a repeat customer comes in or client, patient, yeah, you can consider a discount and let them know that the regular price is this and they're getting this, and then that just increases the love, right?

Yes, was it two days ago we had a patient who is a retired doctor. I mean, he's living much higher on the hog than

I, but you know, we gave him a little professional courtesy sometimes because this is what they expect, But it's not as bad as the athletes or the actors.

They want everything for free and they're a bit insufferable. But yeah, you can do professional curtesy if that's what you want. If somebody just demands a lower price and is haggling, that's not great.

That's a good thing. I mean, if they can find it cheaper and better somewhere else, then just let them. Because, you know, a relationship is based on trust and part of the flow of energy is paying us, so if there being that way, it might not be a great relationship going forward.

What do you do with friends and family? Well, I have a complex relationship with mom, obviously, and she's not always up from the slots, but you got to let them know that this is what I would be charging a regular person so they don't destroy, uh, the perceived value.

Right. So if you give mom a treatment, that's 2,500 bucks for an epidural and you only charge her 1500. Let her know that, you know, she should not blabber mouth about what a great price she got.

Cause you keep on giving away stuff for free or cost, then you're not going to be sustainable. Right? Common sense. I mean, there are times when I will do below costs, right?

Lose money. That's fine. Sometimes for. You know if somebody's really destitute, obviously if you were in a situation where somebody has like a medical emergency, a stroke, or heart attack, It can feel like highway robbery.

And so that's always an odd situation. You might want to lower your margin there, but you'd be surprised at how often, you know, the saying is no good deed goes unpunished, But a lot of times, good deeds do get rewarded.

But anyway, that the glory and the wonderful thing about having a product with such decent margin, You can be more fair and even generous, magnanimous.

If we go out to the market and say, what are things costing PRP? Usually 500 to 2,500, there's the cost of the kits and whatnot. It's a good technology, but it's old because think about it really, the PRT causes the inflammation.

That's why they say you can't take ibuprofen, aspirin, whatnot, which brings in the stem cells which secrete your old exosomes, does the reprogramming that allows the niche or the organ or joint to regenerate.

But why have the stem cells in the inflammation? I just treated a stroke patient. She had a stoke three years, two and a half years ago. And she did an IT band just because she knew a guy and he did the PRP and it caused it to light up really bad after the information.

It was only X sums that got her back to running three miles a day again. So sometimes the inflation is a double-edged sword, right? Autologous stem cell, yeah, you can get a liposuction, maybe even a bone marrow aspirate from your iliac crest.

This will run you four to eight grand. And remember you're paying Peter to pay Paul as the saying goes. So you get your own stem cells relocated. Does this work?

Absolutely. Is it a good technique? Yeah. It's slightly more risky, but this is something that people do and it is helpful for some reason. Algenic or off-the-shelf stem cells from another person, not a big fan of.

They usually dose in 10 million and this can run you 4 to 10 grand, usually the average of 5 or 6. Again, studies show that if they're not mu cells, which we just did a podcast last week with an expert and a licensee in mu-cells, then they'll be dead within two or three days.

But they will still secrete a bunch of exosomes in your knee during that time. So I'm not going to poo-poo that. It is expensive. Because with the exostomes, it's a non-cellular product.

it has no self-identity. You're very able to scale up the amount. There's no way that your body can detect and destroy them. So they'll be around for a little bit, maybe a day or two, and they will reprogram as they see fit or as the random dice throw has it.

But you have much more flexibility in the pricing, right? You can do as little as like one unit of regular strength up to, generally the most I do is five triple, which I bring down to 6,000 from 7,500, literal margin or whatever.

So, but I think that, you know, can work with people depending on you get a feel for their budget. Sometimes money is no object. I have three patients that are literal billionaires, they don't pay more than the average person or the destitute person.

That's just my policy. And I'm sure I could get away with it, But I don' So I think X-Tomes are superior because you can scale the costs. You can, as long as you prep them and say, look, if your knee gets better, then you need to repeat it or you CAN repeat, right?

So that's a little more flexible than just dumping someone else's cells in there. We got to think about microchimerism too, so we go a bit into that last week's podcast with MuCells.

Are you becoming a mixed genetic immunological organism? I don't know. So anyway, the best practice in my experience over eight years is give them a trial and then tell them upfront, hey, if you feel better, it's something you might want to repeat next time I'm around or in two, three months.

I think the peak effect is about five to eight weeks, but. Repeat as necessary. So what are we doing this for? We're trying to win win, right? we're Trying to be sustainable.

We try to keep our patients happy, make them think good things about us. The old adage in the lesson in Stephen Covey's course was win-win or walk away.

If you're not both thriving in a relationship then that's okay. The repeat patients in my experience are the best and they will refer 20 people to you and out of those 20, exactly zero will go along with it.

But when the confluence of necessity, suffering, budget and curiosity come into place, then maybe you'll acquire a new patient. We talk about repeat patience in this interesting video.

Again, if the situation warrants like a patient's not happy, you can refund. Sure, we try not to do that. We can consider low cost or no cost repeat treatment.

But yeah, it's better to just refund the patient and go through a huge legal battle with a lot of malice, right? Even though it says right on the consent, this is not guaranteed to anything.

Inexperienced because a lotta people 70 to 80% get better. It's probably still a good business model but you need to match expectations up front and you know use the analogies like remodeling a home.

Rome wasn't built today your break pads all that people get. So again, the attribution bias is interesting. There's something very patient, like the guy whose hair was really thinning and we fixed his plantar fasciitis, his knee, wrist, whatever.

He grew a whole chair hair, full of hair. And he said, Oh, I think it's the Rogaine I bought from Costco. Even though he'd been on Rogain for years. What that is, is not misattribution by attributions bias.

It's just, he doesn't want to pay for another X or something and that's fine. Remember, we're in a high ticket thing and even rich people don't like to overspend or be ripped off.

So keep that in mind as you maintain your healthy, good relationships. And I think it's important for those of us that grew up in the age of Marcus Welby MD, you know, and then there are kind of postmodern reaction, house MD.

You know everybody lies, everybody misrepresents. We're not as smart as AI, so we have to be honest about what we know. And the chart above me, as you get to know somebody, they trust you, getting to you.

All that stuff. You gotta have that loyalty, that trust. Uh, you gotta listen actively. Know what their goals are. This is a good relationship. So, don't be afraid as many doctors and people are to say, I don' know or I'm not sure.

Everyone is different. And I think the most useful thing is what would you do if it was your mom? Sure. That's a great question. Because no one can know all the risks, all of the potential benefits.

So yeah, if someone says to me, hey, what's the chance that my tinnitus is going to get better? I didn't realize mom's tennitus had gone away after a treatment last year.

Because I wasn't listening because she's my mom and there's a lot of stuff that comes out of her that's annoying. But yeah. I would say to somebody, I have 20%. I mean, someone said to what the chances of my knee arthritis would get, in my experience, 80%. So this is why they come to you because you have the experience and always keep those lines of communication open.

We just had a consult with a guy's mom. I had no idea that he had high drops of his ear. Five years ago, it was treated, went away. He didn't even tell me.

So it's good that Denise will follow up with patients, ask them how they're doing. A lot of times no news is good news, sometimes it's not. Sometimes people get better after four months and they were really unhappy that they did it, but then in the end they're like, when are you coming back?

So you just never know. Keep those lines of communication open. And I'm always revamping the post-care instructions. Everyone is different. I should probably have different ones for different types of procedures.

But again, Claude will probably help me with that soon as Claud is really good at doing stuff like that. So all those forms, post care instructions, cheat sheets, consents, it's all downloadable on the website.

If you have questions, we'll address that now. My email is there. You can add me as a contact. The YouTube channel is drpark65. The master class for providers, this includes advanced practice, nurses, PAs, et cetera, and Azure Pass that can do injections is RechargeBioMetal.com masterclass.

And you can scan this QR code to be on our monthly provider list, so you'll get the reminder on the day of, the whole day before. when we do these monthly AMAs.

So I'd love to hear what you guys are doing in terms of pricing. I'm going to stop sharing this and I will open it up to questions. Does anybody want to share what they do for pricing?

I like to get Sarah on because Sarah has been there for 10 years at the inception. Hi, Ed. How are you doing? That's the real Sarah. Is this the Real Sarah?

It's The Real Sara. Hello. I hope I didn't get us in any trouble. But I'm going to redact the pricing and whatnot. No, that sounded great. That sounded right.

You know, it's an all over feel from what I've seen, depending on the area of which people are in. Some doctors with much larger concierge services will be charging upwards in costs up to eight grand for certain treatments plus.

So, no, it's definitely kind of a lower scale and you do a great job at helping people out all the time. Yeah. I mean, I don't like to gouge them. No.

But I just think that, you know, people will, of all of the brands that people compare and contrast, like it is Chimera still for some reason. And they say, well, why do you want Chimaera?

I've been using this other brand and it was terrific. So you get that friction between the consumer and the provider. We have definitely seen, you know, it's funny, when a doctor will leave to use another product on their patients, but when their family gets sick or they get sick, they come back to Kamara.

Yeah, we know our friend who shall remain nameless fell out of a tree, and you've been talking garbage about your brand until he fell of the tree. So, those of you who know it, there's a difference if you're trying to make a dollar or whether you really trying to treat people with where you really think they're going to avoid to help them.

Oh, for sure. I just bumped into our friend Mitch at a conference last weekend. And he uses something I wouldn't use because it's amniotic fluid source.

Okay. It was the weirdest thing, Sarah. I had been talking to this friend, this last patient, and his wife had descended into being a total shut-in, unable to eat, communicate, over seven weeks.

And I knew what was causing it and I know exosomes could help, but I have a moral dilemma about maybe we just prolong her life. But Mitch had no compunction.

He went in there and gave her this one brand of amniotic exomes and your brand. And my goodness, the next day she started talking and over the last next week, she'd become conversant.

It was literally both her adult sons were going to pull the plug and say, my mom's had a good life. So, yeah, it's amazing the things that I've seen. The people come back, people coming back from all sorts of different ailments.

Yeah. I got to redo my will and make sure that if I'm on a machine that my kids push at least one vial of plus into me. There we go. Well, okay. Maybe see you next week then.

Have an enjoyable weekend and thanks for being on. Yes. Thanks so much. This was a great talk. I'll bring up a topic. Hey, Dr. Park, how come you don't sell packages like for face or hair?

That's what everyone else is doing. Oh, good question. I probably should, but seeing as I'm only one person without a mid-level person to help me with the procedures, undoubtedly, you get a better end result if people can do repeat treatment spaced two, three weeks apart for hair and for the face.

But I've just not set up that way. And it's a good way to capture revenue, to catch your loyalty, have a That's one thing that if I did have a physical office and permanent staff, I would probably avail myself of.

I didn't leave out the Vive, which is an older category. Don't use it much. Do I have used it, but I think the Kiara will suffice for facial and hair applications been quite successful for people.

Lou says I do 1.5 times. That great. It's reasonable. You know, I think some people, one of my colleagues charges like, you know what I charge 6,000 for.

Yeah. Yeah, she'll charge a little more as Sarah said, but everything is, you know, up to your discretion, right? But I hate that feeling when people come back and say, doctor, I got the same vial from someone else and it was, much more or much less.

Like we try and stay in the realm. And even though this brand could be commoditized, i do think that in my experience, the doctors have switched out. They do get requests for this brand, and so I think that speaks to how reproducible and predictable the results have been.

Anyone else have a comment about a good case, bad case? Something that they learned? What never to do? Oh, here we go. We're right here talking about, so photographic memory was something also that was really big that with brain injuries, with the nasal specifically.

Yeah, photographically. Oh, your boyfriend you mean? Yeah. I mean, this guy, so Sarah called me in three or four

weeks ago to help him. Brilliant composer, musician.

So what she's talking about is the eidetic memory or the really strong photographic memory. That's great. He needs that as a musician, I saw his live post on Yeah, that's great.

And then memory and just speech and function and a number of other different things that have seen huge difference in. That's awesome. Yeah. No, he was a little on the anxious side because when you lose what you had, then you get uncertain and it feels weird.

But clearly he's coming back into his own. Yeah. Yeah, so I can't wait to meet up again. That'd be great. If anybody gets a chance to be friends with Sarah, soup has a lot of benefits because over the years, yeah, you've referred me to a lots of these people, but you know, these artists, like even the people I treated and their whatever knee problem went away, they'll refer me other people.

But it's like the trust just gets diluted, right? That guy with the violin. and the art gallery, he was so untrusting. Because, you know, it doesn't matter how great a result you have, unless it's like you're really suffering, they won't take the plunge.

They won' t make the leap. Yeah. Okay. Thanks, Sarah. Thank you, Dr. Park. Yes, ma'am. Anyone want to chime in? Thanks for sticking around. We got a lot of happy customers, hopefully, and patients and doctors.

Love to see it. Alright, well let me wrap up then. Alright so this has been a conversation about what to charge for exosomes and of course there's no right or wrong answer.

But if you like this kind of content, if it helps you, then go ahead and like and subscribe and join our newsletter. Every week we put out a new podcast and every month we do a provider live webinar.

Again, Dr. Ed Park signing off. Thanks a lot. Many clinicians are getting interested in exosome therapy and they hesitate for good reason. Questions like, does this work?

What forms do I need? How much should I charge? how do i stay out of trouble? All these questions are addressed in my online course. That's why I created it to help you get started.

The online course is your permanent turnkey resource to get started either treating yourself, friends and family, or to expand your practice and help more people, as well as increase your revenue.

Thanks for tuning into the Recharge Biomedical Podcast. If today's episode got you thinking, you'll love my book, Exosomes, Songs of Healing. It's packed with cool analogies, full color illustrations, and all the science you need to understand how exosome are changing the game in aging and regenerative medicine.

You can grab it in paperback, ebook, or audiobook, whatever works for you. Now head over to www.rechargebiomedical.com to check it out. And don't forget to like and subscribe so you never miss another episode.

See you next time.