INFINITY
Medicina Regenerativa

A DOCTOR'S GUIDE
TO RECOMMENDING
STEM CELL THERAPHY

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MISSION AND PURPOSE

The mission and purpose of Infinity Medicina Regenerativa is to provide patients from all around the world access to healthcare services that will improve the quality of their life.

This booklet is a step-by-step guide on how to help bring first-time and repeat patients on a comfortable trip to Colombia for medical tourism, all the while generating another stream of income.

First we'll go over regenerative medicine, then we'll cover how Infinity Medicina Regenerativa does things differently, and why.

Carrying out a stem cell therapy procedure in Colombia is different to doing it in the United States. In Colombia we are legally allowed to do more than just manipulate the stem cells minimally. We also have the opportunity to:

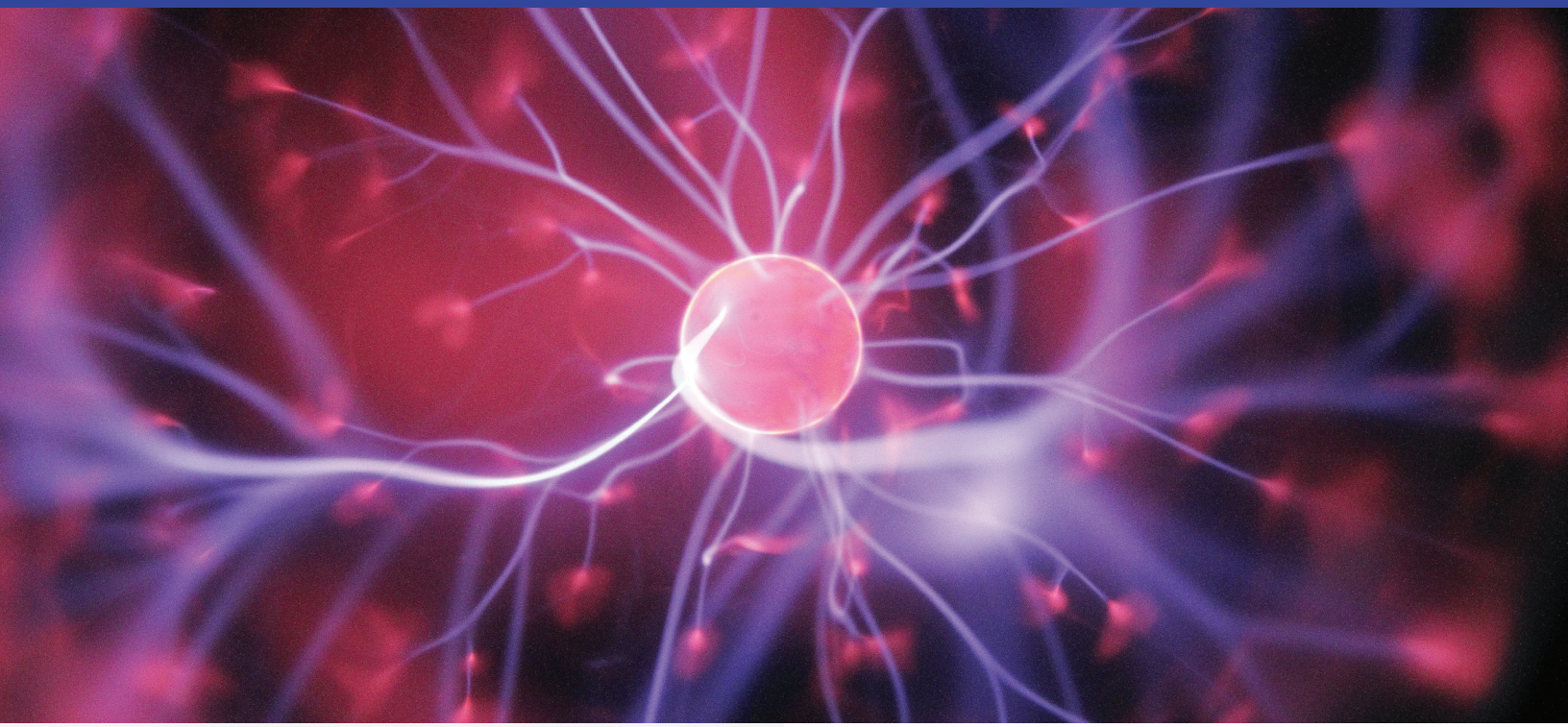
1. Remove any detrimental material that would cause negative effects, and then be able to safely do an IV application.
2. Let the stem cells do what they do best: proliferate (increase and multiply).

How do we stand apart from the rest and perform to the highest level of quality control?

We only receive stem cells from donors screened by our chosen top gynecologist, who specializes in screening donors. We do this to ensure that we consistently and accurately receive only the best stem cells from the best donors.

HOW WE DIFFER

Universal standards require 80% of cell viability (to be alive). We, on the other hand, reject anything under 90% cell viability to ensure our patients receive the best results.



UNITED STATES – STEM CELLS

FDA

MSC's from Wharton's Jelly

MSC's can not be expanded and only minimally manipulated

Not approved for IV use federally in US

2 million stem cells per CC

Cryopreserved

It costs $2,500 for every 1 million stem cells

COLOMBIA – STEM CELLS

Invima (Colombia's version of the FDA)

MSC's from Wharton's Jelly

MSC's can be expanded

Stem cell is approved for IV application

1 hundred million stem cells per CC

Not cryopreserved

It costs $114 for every 1 million stem cells

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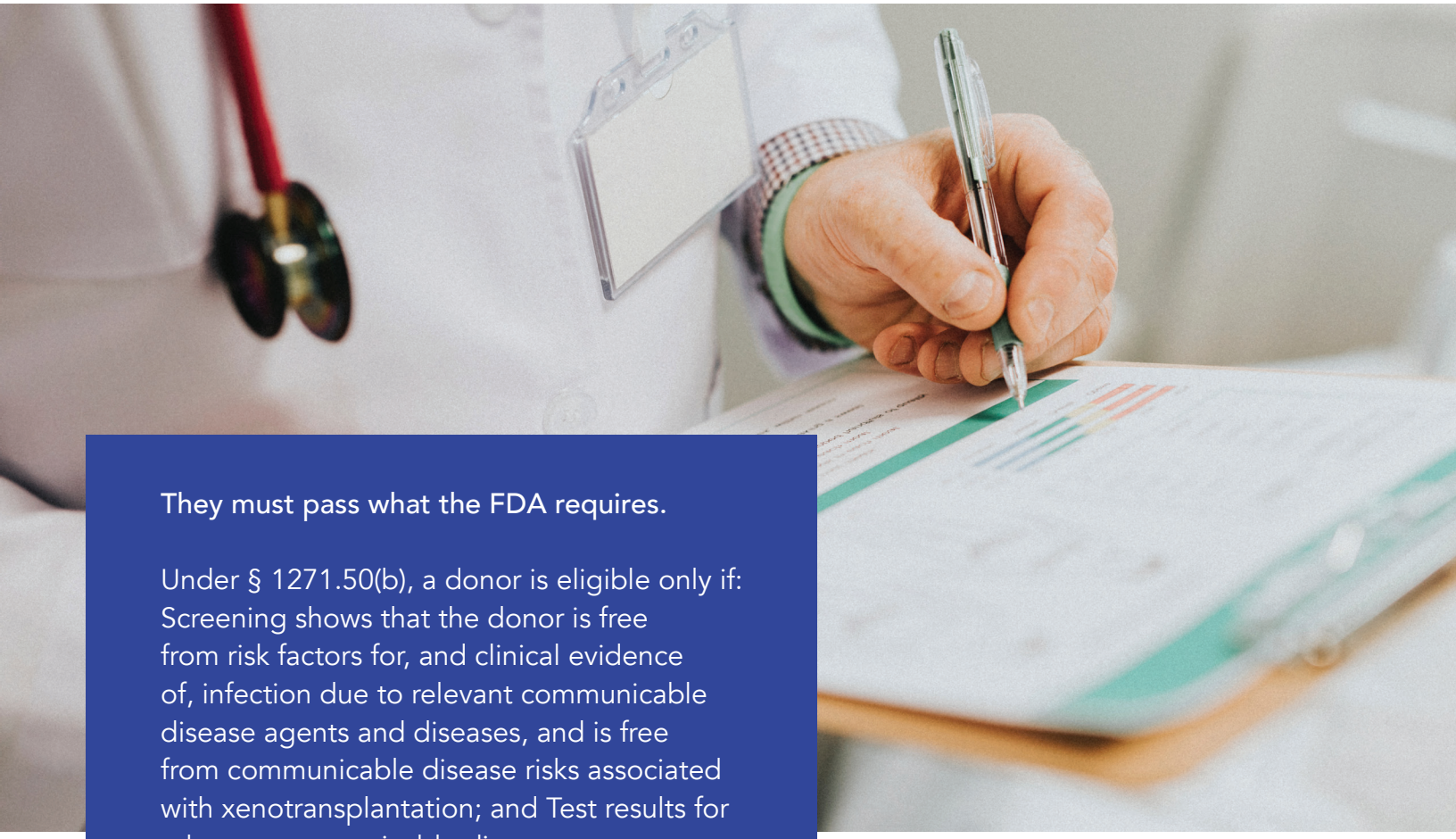
FIRST PART OF SCREENING

The requirements that our donors must meet when being screened: donor parents must be young and healthy. Young and healthy parents mean young and healthy stem cells.



They must pass what the FDA requires.

Under § 1271.50(b), a donor is eligible only if: Screening shows that the donor is free from risk factors for, and clinical evidence of, infection due to relevant communicable disease agents and diseases, and is free from communicable disease risks associated with xenotransplantation; and Test results for relevant communicable disease agents are negative or nonreactive, except as provided in § 1271.80(d)(1) for non-treponemal screening tests for syphilis:

- Human T-lymphotropic virus (HTLV), types I and II
- Chlamydia trachomatis
- Neisseria gonorrhoeae

We also make sure to check for any heredity diseases.

We only accept donors that have a completely normal and natural pregnancy with no complications.

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SECOND PART OF THE SCREENING

Once the first set of screenings has been performed and passed, it is then explained to the donors that half of the umbilical cord stem cells will be preserved for them for future use, the other half thenceforth is used for our patients.

A donation kit is given to the mother so that when she is giving birth, she has it readily available to give the doctor looking after her pregnancy. The doctor that will be responsible for the donated umbilical cord knows exactly what to do with the kit to meet the strict protocols.

We make sure that the stem cells are isolated from the blood – and only the stem cells are what is gathered. These umbilical stem cells are from a universal donor so anyone can receive treatment, with no negative side effects.

We work exclusively with one of two trusted labs for chromosome testing. Once the results have come back, only then do we move forward in our quality control process.

For the last part of our quality control, we have our own genetics lab, where we actually do paternity tests and also make sure the DNA collected has 16 genes. Once it is cultivated, we make sure no mutation has occurred.

Then and only then do we actually grow the stem cells. It takes about 7 days to cultivate. Once that is done we take further precautions to ensure that the cells do not become contaminated. We constantly send samples to be tested to guarantee quality and effectiveness.

We take and compare cultivated cells with the first batch of original cells and make sure there are no discrepancies. Once it is established that they are identical and that there is no contamination, we then focus on the last part of the process: to count and verify that we meet the minimum stem cell count promised. In most cases people actually receive more than the minimum promised.

Lastly, although we do have the capability to freeze and cryopreserve stem cells, that is only done with the stem cells that are reserved for the donors. The stem cells our patients receive are fresh, non-cryopreserved stem cells which studies have shown have better efficacy, ensuring that you receive the freshest and most effective stem cell treatment.

Our chief medical director checks twice a week on a worldwide database that constantly updates new information in a medical field with over 30k case studies on its files – and our lab has access to all of this information. Every 8 days our chief medical doctor looks at all new studies to see if any negative side effects from UC MSCs have been reported. So far not one study has shown any severe side effects.

What we consider severe side effects:

- Death
- Negative life-changing events
- Admission to hospital
- Disability or paralysis.

**The only unwanted side effects that have been reported to us have been minor. 10%–12% of patients experience pain, usually in the form of a mild headache, pain at the injection site, etc. Those mild headaches do not last long, and are usually associated with IV treatment. Another symptom we have seen might be a hot flush. Again, it is a very small portion of patients that ever experience this. There is always a risk of infection, as in any medical procedure, although the probability is very low, due to our strict protocols.*

OUR MEDICAL STAFF AND LAB

Our lab team works closely, and some also lecture at Pereira's University of Technology (Universidad Tecnológica de Pereira), which has more than 20 years' experience of managing clinical studies and gene studies. They also work closely with ISCT (International Society for Cellular Therapy).

ISCT is a global society of clinicians, regulators, researchers, technologists and industry partners. It is the global leader, focused on pre-clinical and translational aspects of developing cell-based therapeutics, thereby advancing scientific research into innovative treatments for patients.

DR. CARLOS ALBERTO ISAZA MEJÍA

Physician and specialized pharmacology surgeon. Professor and researcher at the Universidad Tecnológica de Pereira, expert in pharmacogenetics and regenerative medicine, co-author of the book "Foundations of Pharmacology in Therapeutics", Editions 1989, 1992, 1996, 2002, 2008, 2014, 2019. Scientific Director of the Laboratory of the Stem Cell Center and Biotechnology CeMaB.

DR. JAINER ENRIQUE ARANZAZU

Biologist with a Master's Degree in Biology. Dr Aranzazu is a lab technician at Center of stem cells and biotechnology CeMaB.

DR. SAMUEL EDUARDO TRUJILLO HENAO

Physician and surgeon, with a Master's Degree in Education, specializing in university teaching. Has held teaching post in Human Anatomy since 1996. And has been researcher with the pharmacogenetic group into stem cell lines since 2016.

DR JULIETA HENAO BONILLA

Julieta Henao, M.D., Medical Geneticist, specialist in regenerative medicine, prenatal diagnosis and in vitro fertilization. Graduated from the Universidad Tecnológica de Pereira, Colombia (UTP), where she is currently a professor and director of the Laboratory of Medical Genetics for Teaching and Research. Dr. Henao's teaching focuses on obstetrics and pediatrics, including fetal development. Her research includes pharmacogenetics and stem cell translational medicine. Technical Director of the Laboratory of the Stem Cell Center and Biotechnology CeMaB.

PRESENTING STEM CELLS TO PATIENTS

Now that you understand how we operate, the strictness and integrity of our quality control standards, and the difference in being treated in Colombia vs United States, we can now educate patients on how our procedures would be beneficial to their lives. Our highly-trained case managers can help with explaining all the above details.

First we will set up a time with you and your patient to coordinate a call and screen share so that we can show you, and them, our PowerPoint presentation.

The easiest way to get things to move forward is for you to draw up a list of patients that you think would be candidates for treatment abroad.

HERE ARE JUST SOME OF THE CONDITIONS THAT WE TREAT IN PATIENTS THAT COME TO US IN COLOMBIA.

CENTRAL NERVOUS SYSTEM

- Parkinson's disease
- Alzheimer's
- Huntington's disease
- Autism

HEART

- Angina & more

LUNGS

- COPD - Chronic Obstructive Pulmonary Disease

AUTOIMMUNE

- Rheumatoid Arthritis
- Lupus
- Diabetes, Types 1&2
- Psoriasis
- Multiple Sclerosis
- Hashimoto's thyroiditis
- Ankylosing Spondylitis
- System sclerosis

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We would like you to be able to provide more information to future patients with confidence but also make it easier for you to streamline patients' information to us, giving you more time and energy to focus on other matters.

Some doctors screen potential patients from their own seminars, separating patients into "locally-treated" and "foreign-treated". By separating new patients into categories, you can easily start them off on the correct procedure path, thus maximizing each and every marketing dollar you spend.

Once we educate the patient and he/she sees how stem cells could be life changing and agrees to move forward, our next step is to gather some information. Most of this information you may already have, some of it you may not. The important thing is that all the forms we require are filled out completely so that there are no delays – and the patient is kept interested.

We are constantly updating our forms and flow of operations to provide the best, most effective functional service for you and your patient.

The first form that needs to be filled out and sent to us is the medical history form. It is imperative that the form be filled out completely, as any missing information or imagery of the patient's condition/disease will result in a delay in response from our medical staff. If you have approved the patient for a specific treatment, please fill out our doctor recommendation form. By providing the signed recommendation form you are confirming that you believe this specific treatment would be in the patient's best interests, and so it will not be necessary for our medical staff to make a recommendation.

Once it is agreed by you (the doctor) or our medical staff and the patient, we must have a final clear determination of what procedures will be performed. We have found that most patients opt in for more than just one procedure, sometimes for non-medical reasons such as cosmetic or anti-aging treatments.

Once it is agreed what procedures the patient chooses to have performed, payment for the treatment must be received. Once we have received payment, we next need to request a date with our lab so that they can check for availability. This is to ensure that not only will the freshest cells will be used, but also, due to the high flow of patients, the process will be carefully and meticulously coordinated. Once the lab has confirmed a date and the patient has agreed to the date, it may not be changed.

HERE IS THE CHRONOLOGICAL ORDER OF STEPS TO BE TAKEN EACH TIME

1. Online meeting with the patient to educate them on stem cell therapy.
2. Complete, then send, medical history form with appropriate imagery.*
3. Determine the recommended treatment by medical staff in Colombia.
4. Clarify all procedures the patient will have performed (IV, nasal, spine, joint injection, facial, hair restoration, other).
5. Patient must make full payment for all procedure and treatments.**
6. Request (from lab) date of procedure.
7. Patient and lab agree to and confirm treatment date(s). ***
8. Buy airline travel.
9. Choose travel package.
10. Pay for travel package.
11. Patient begins their journey to experience stem cells.

**Any and all imagery associated with patient's condition is necessary for evaluation by our staff in all cases.*

***Full payment must be made for all treatments before arrival in Colombia.*

****No changes can be made to treatment dates once agreed by the patient and lab.*

CHOOSING A TRAVEL PACKAGE

We have taken the guess work out of all details once the patient has arrived. From everything from transportation, to translators, we have it well mapped out and planned, if the patient so chooses. We hold ourselves in high regard for providing the best customer/patient service, and with that have created the best packages that patients have enjoyed. Every hospitality option is chosen by us first-hand. The fincas (high-end luxury estates) and hotels meet or exceed the highest standards for what we think would create a great experience, and provide an excellent service.

For patients with limited mobility, we make sure to keep them in a luxury hotel adjacent to the lab for easy access, so as not to put them under further strain of travel. For patients coming with doctors in a big group we try to make the experience that much more enjoyable and comfortable by accommodating them in fincas. These fincas are available for certain groups based on quantity of people, number of days staying in Colombia, and patient mobility.

Please keep in mind:

Prices for procedures and for the trip are two separate costs.

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