

**Instructions for ERCP**

You have been scheduled for an ERCP (examination of your pancreas and biliary tract system). In order to insure a complete and successful examination, please follow these instructions carefully:

**DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_ **Check in 1 hour before** @ **Location:**

Providence Medical Building is located on Inkster Rd at 12 ½ mile area- on the South side of Northwestern Hwy Enter at the West entrance, straight to elevator	Providence Novi Outpatient Building door has a pyramid canopy with a statue of two nuns in front and is the building facing Grand River Ave.
<input type="checkbox"/> <b>Providence Hospital Main entrance- Southfield</b> 16001 W. 9 Mile Rd. @ Greenfield Southfield, MI 48075 use the 9 Mile entrance	<input type="checkbox"/> <b>Providence Park Hospital, Outpatient Center - Novi</b> 47601 Grand River Ave @ Beck Novi, MI 48374 the 2 <sup>nd</sup> floor of the Outpatient Building

If you are unable to keep your appointment, **call** the office at least **24 hours in advance** to cancel the procedure. Note: Any less time to cancel or reschedule may result in a charge for set up, boarding and rescheduling.

<b>2 wks. Prior</b>	1. <b>If you take Diet pills</b> not limited to but including, <b>Phenteramine</b> (Phen-Phen Diet Pills), stop this and any type of diet medication 2 weeks prior to procedure.
<b>1 Wk. Prior</b>	1. <b>Stop Iron</b> , 1 week before your procedure.
<b>7-5-2 days prior</b>	2. If you take the following medications, stop according to medical guidelines. If you are a <b>heart patient</b> and taking these medications, <b>consult your cardiologist</b> prior to stopping. <ul style="list-style-type: none"> <li>• <b>Stop Effient (prasugrel)</b> 7 days prior.</li> <li>• <b>Stop Coumadin (warfarin), Plavix (clopidogrel) &amp; Brilinta (ticagrelor)</b> 5 days prior.</li> <li>• <b>Stop Pradaxa (dabigatran), Xarelto (rivaroxaban), Eliquis (apixaban) &amp; Savaysa (edoxaban)</b> 2 days prior.</li> </ul>
<b>DAY BEFORE</b>	1. Take nothing by mouth after midnight. 2. To properly check oxygen levels, please <b>remove any dark finger nail polish</b> . 3. <b>Do not eat until after your procedure.</b>
<b>Day Of Procedure</b>	1. On the <b>morning</b> of your examination, <b>take your heart and/or blood pressure medication</b> between <b>5 &amp; 6 a.m. with a small sip of water</b> . Please brush your teeth, do not swallow toothpaste. After your shower, <b>do not use body lotion</b> . NO gum or hard candy. 2. If you are <b>diabetic</b> , please <b>hold your diabetic medication</b> the <b>morning of your procedure</b> . If you need help with your diabetic medication, please ask your primary doctor. 3. <b>Do not eat or drink anything</b> on the morning of your examination <b>after medicine</b> . 4. <b>Bring someone with you</b> to stay during your procedure and take you home. If you arrive alone, your examination will be cancelled. 5. Please <b>be on time</b> . If you are late, you will be the cause of major delays for all other patients' under-going similar examinations. Furthermore, if you are late, your examination may be cancelled and so that the schedule for other patients can be maintained.
<b>After Procedure</b>	1. After you are <b>discharged</b> , return home. <b>Do not drive</b> , operate machinery, or drink alcoholic beverages for <b>18-24 hours</b> . 2. If you have any complications (vomiting, abdominal pain, tenderness, fever or bleeding) after returning home, call the office, after 4 p.m. call the answering service at 866-830-7280

# Understanding ERCP

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## What is ERCP?

Endoscopic retrograde cholangiopancreatography, or ERCP, is a specialized technique used to study the ducts of the gallbladder, pancreas and liver. Ducts are drainage routes; the drainage channels from the liver are called bile or biliary ducts. If your doctor has recommended an ERCP, this brochure will give you a basic understanding of the procedure - how it's performed, how it can help, and what side effects you might experience. It can't answer all of your questions, since a lot depends on the individual patient and the doctor. Please ask your doctor about anything you don't understand.

During ERCP, your doctor will pass an endoscope through your mouth, esophagus and stomach into the duodenum (first part of the small intestine). An endoscope is a thin, flexible tube that lets your doctor see inside your bowels. After your doctor sees the common opening to ducts from the liver and pancreas, your doctor will pass a narrow plastic tube called a catheter through the endoscope and into the ducts. Your doctor will inject a contrast material (dye) into the pancreatic or biliary ducts and will take X-rays.

## What preparation is required?

You should fast for at least six hours (and preferably overnight) before the procedure to make sure you have an empty stomach, which is necessary for the best examination. Your doctor will give you precise instructions about how to prepare.

You should talk to your doctor about medications you take regularly and any allergies you have to medications, or intravenous contrast material. Although an allergy doesn't prevent you from having ERCP, it's important to discuss it with your doctor prior to the procedure.

Also, be sure to tell your doctor if you have heart or lung conditions, or other major diseases.

## What can I expect during upper ERCP?

After being wheeled to a procedure room and placed on a monitor, you will receive sedation, at intervals, to relax you and help to keep you comfortable through the procedure. Your doctor may also spray your throat with a local anesthetic, and your doctor will pass the endoscope through your mouth and into the esophagus, stomach and duodenum. Staff members will closely watch your condition, including heart rate, blood pressure and oxygen levels, during and after the test. The endoscope doesn't interfere with your breathing, most patients consider the test only slightly uncomfortable, and many patients fall asleep during the procedure.

## What are possible complications of ERCP?

ERCP is a well-tolerated procedure when performed by doctors who are specially trained and experienced in the technique. Although complications requiring hospitalization can occur, they are uncommon. Complications can include pancreatitis (an inflammation or infection of the pancreas), infections, bowel perforation and bleeding. Some patients can have an adverse reaction to the sedative used. Sometimes the procedure cannot be completed for technical reasons.

Risks vary, depending on why the test is performed, what is found during the procedure, what therapeutic intervention is undertaken, and whether a patient has major medical problems. Patients undergoing therapeutic ERCP, such as for stone removal, face a higher risk of complications than patients undergoing diagnostic ERCP. Your doctor will discuss your likelihood of complications before you undergo the test.

## What can I expect after ERCP?

If you have ERCP as an outpatient, you will be observed for complications until most of the effects of the medications have worn off. You might experience bloating or pass gas because of the air introduced during the examination. You can resume your usual diet unless you are instructed otherwise.

Someone must accompany you home from the procedure because of the sedatives used during the examination. Even if you feel alert after the procedure, the sedatives can affect your judgment and reflexes for the rest of the day.

**Please contact your doctor promptly if you have any follow-up questions or if you are experiencing any complications due to the procedure.**

***ASGE - The Source for Colonoscopy and Endoscopy***

## IMPORTANT REMINDER:

*The preceding information is intended only to provide general information and not as a definitive basis for diagnosis or treatment in any particular case. It is very important that you consult your doctor about your specific condition.*

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