

**SPECIAL INSTRUCTION FOR MEDICATIONS  
IN PREPARATION FOR PROCEDURE**  
*Hillmont GI, P.C. 215 402.0800*

**NAME/DOB:** \_\_\_\_\_

***STARTS 1 WEEK PRIOR TO PROCEDURE***

To have a complete and accurate and examination done as safely as possible, it is important that you follow the medication recommendations on this page. If these are not followed, the test may have to be rescheduled for another day.

**SPECIAL INSTRUCTIONS**

**BLOOD THINNERS**

STOP \_\_\_\_\_ blood thinner \_\_\_\_\_ DAYS prior to the procedure

**DIABETIC MEDICATIONS**

**DAY BEFORE PROCEDURE:**     NO CHANGE     TAKE NONE ALL DAY     SKIP EVENING MEDS

OR \_\_\_\_\_

**DAY OF THE PROCEDURE:**     NO CHANGE     NONE UNTIL YOU RESUME DIET

OR \_\_\_\_\_

**NO DIURETICS/WATER PILLS ON THE DAY OF THE PROCEDURE**

Includes: Lasix(Furosemide), Bumex(Bumetanide), Dyazide(HCTZ/Hydrochlorothiazide), Demadex(Torsemide), and others

**OTHER:**

**OTHERWISE, TAKE ALL MEDICATIONS AS YOU NORMALLY WOULD. IF YOU NEED TO TAKE MEDICATIONS WITHIN 3 HOURS OF THE PROCEDURE, THEN DO IT WITH ONLY A SIP OF WATER.**

For questions about the procedure, medications or to reschedule your appointment, call 215-402-0800 between 9:00AM and 5:00PM

**CLINICIAN:** \_\_\_\_\_