Endoscopic Retrograde Pancreatography
Please Read 1 Week Prior to Exam

Patient Name: 

Medical Record Number: 

Appointment
Date: 

Time: 

Arrival time
Arrive at least 60 minutes before your scheduled procedure time. If you are late, your procedure may be cancelled or rescheduled for a later time. Please allow extra time to find parking and appointment location.

Most patients will leave approximately 3 to 4 hours after arrival.

Outpatient Procedure Center (OPPC)
710 Lawrence Expressway, Dept. 240
Santa Clara, CA 95051-5173

Please bring your member card, picture identification and payment with you.

Leave your valuables at home
Please DO NOT wear jewellery or bring valuable belongings as they will be placed in a locker for the duration of your exam.

Designated Driver
A responsible adult must come with you for your procedure. A sedated procedure will not be performed without a verified driver/escort. Please have your driver/escort stay in the waiting area for the duration of your appointment.

Medication precautions
If you are taking aspirin for your heart or stroke risk please continue it.

If you are taking Plavix, Aggrenox, Dabigatran (Pradaxa) or any other blood thinner for your heart, please inform us immediately.

Stop all Nonsteroidal anti-inflammatory drugs (NSAIDs) one (1) week prior to your exam. These pain medications include ibuprofen (Motrin, Advil) and naprosyn (Aleve).

If you are taking Coumadin, you will need to stop it five (5) days prior to your exam. Once you have been scheduled, please inform the anticoagulation clinic to review your Coumadin regimen. You can contact the anticoagulation clinic at (408) 366-4323.

Blood pressure medications should be continued.

If you are diabetic:

- Do not take your oral diabetes pills (glypizide, glyburide, metformin) in the morning the day of the procedure.
- Do not take any short-acting insulin (Regular, Aspart, Lispro) in the morning the day of your procedure.
- You may restart your diabetic regimen after the procedure is completed.

Please review these recommendations with the provider who has been managing your blood sugars as these are general guidelines. Your provider can provide recommendations that may be unique to your case. This is especially important for those with Type 1 diabetes or difficult to control sugar levels.

Eight (8) hours before your visit
DO NOT eat or drink anything, including water, 8 hours before you visit. The meal prior to your fast should be light. A large meal may preclude an appropriate exam.
**Driver Agreement & Medication Log**

Please bring this page with you to your appointment.

**Driver Certification**

I, ____________________________, am scheduled to have a sedated procedure in the Gastroenterology/Outpatient Procedure Center on ____________________________. I understand that I will not be able to drive home due to the medications. I have arranged for ____________________________ to be my adult designated driver (18 years or older). I understand that my procedure will not be performed until the Gastroenterology/OPPC staff confirms that my driver is available.

Driver’s Name:________________________  Home: (____)__________  Cell: (____)__________
Patient Signature:______________________  Date:______________  Staff: _____________________

**Medication List**

Please list current medications and when the last dose was taken. You should include over-the-counter medications and supplements. Please bring this to your appointment.

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About Endoscopic Retrograde Cholangiopancreatography (ERCP)

ERCP is a test which uses a flexible tube and X-rays to view the bile and pancreatic ducts.

The most common reason why someone would need an ERCP is because of a blockage of one of these ducts (often due to gallstones).

The doctor will examine the bile and/or pancreatic ducts, looking for abnormalities such as blockages, irregularity in the tissue, problems with the flow of bile or pancreatic fluid, stones, or tumors. Depending on what is found, the doctor may try to improve the condition by performing a variety of treatments.

What to Expect

An IV line will be placed in your hand/arm. You will be monitored throughout the procedure.

At the time of the procedures, your doctor will review the procedure with you, including possible complications, and ask you to sign a consent form.

Procedure

You will receive sedative medicines through the IV line. Many patients sleep through the test or are very relaxed and unaware. You will lie on your stomach for this test.

The endoscope is inserted through the mouth and the doctor will gently pump air in to allow him/her to reach the area of the bile/pancreatic duct.

During the procedure, the doctor will place a small tube into the bile duct and inject dye. X-ray pictures will allow the bile/pancreatic duct to be seen. Depending on what is seen, the doctor may make a small cut (sphincterotomy), remove stones, stretch a narrowed area, obtain samples or place a tube (stent) to improve flow.

Recovery

Afterwards, you will be observed in our recovery area until most of the effects of the sedative medications wear off. It is not uncommon to have bloating and gas cramps. You will need to pass gas. Do not be embarrassed about doing this during or after the procedure. You should not return to work, drive, or drink alcohol that day. Your doctor/nurse will review the findings with you and your driver.
Potential Complications

- **Pancreatitis (inflammation of the pancreas)** is the most common complication, occurring in up to 30 percent of patients. This presents with abdominal pain/nausea/vomiting and often requires hospitalization. Rarely pancreatitis may be more severe, lead to a prolonged hospitalization and can even be life threatening.

- **Bleeding** can occur particularly if a sphincterotomy is performed. This is usually minimal. However, the bleeding can be significant requiring hospitalization to stop the bleeding.

- **Perforation (a tear or hole in the intestine)** is not common. However, this is a serious condition and may require surgery to fix.

- **Infection of the bile ducts (cholangitis)** is rare in general, but it can occur. Treatment of infections requires antibiotics and drainage of excess fluid.

- **Dental Damage** It is possible to have side effects from the sedative medicines which may require additional medications or even hospitalization.

- **Aspiration (inhalation) of food or fluids into the lungs.** The risk of this complication is minimal in people who do not eat or drink for several hours before the examination.

- **Death**

The following symptoms should be reported immediately:

- Severe abdominal pain (not just gas cramps)
- A firm, distended abdomen
- Fever or chills
- Vomiting of blood

If you have any questions about the risks of this procedure, please discuss them with your doctor. You can also learn more about the procedure through EMMI, our new online instructional video. This can be accessed through the Gastroenterology physician homepage at kp.org/mydoctor.