ERCP
Please Read 1 week Prior to Exam

Patient Name:

Date:

Arrival time:

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

Please be at the OPPC at your scheduled time. If you are late, your procedure may be cancelled or rescheduled. Most patients will leave 3 to 4 hours after checking in.

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

To cancel or reschedule this visit, please call (408) 851-2750 no later than 72 hours before your appointment.

Leave your valuables at home
Please DO NOT wear jewelry 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. The procedure will not be performed without a verified driver/escort.

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

If you are taking Plavix, Aggrenox, Dabigatran (Pradaxa), Eliquis, Xarelto or any other similar blood thinner, please inform us immediately.

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.

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

Blood pressure medications should be continued.

If you are diabetic:
- Do not take your oral diabetes pills (glipizide, 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 the diabetes recommendations with the provider who has been managing your blood sugars as these are general guidelines. They 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.

DO NOT eat after midnight the night before your procedure. You may drink clear liquids up to 3 hours before your procedure.
Endoscopic Retrograde Cholangiopancreatography

This procedure involves placing a tube in your mouth and passing it down your esophagus, through your stomach and into the upper part of the small intestines. There is a small opening into the ducts that drain the liver, gallbladder and pancreas. A small catheter is then inserted into the duct(s) for evaluation under x-ray.

Although this procedure is usually safe, like any procedure, there are potential risks. These include, but are not limited to:

- **Pancreatitis:** Inflammation of the pancreas may occur. This may be mild or very severe requiring a prolonged hospital stay.
- **Drug reaction:** It is possible that you might develop a reaction to one of the medications. This may affect your breathing, heart rate and/or blood pressure.
- **Infection:** This may occur in the bile ducts, liver or blood stream. Antibiotics may be given prior to the procedure to reduce the risk.
- **Perforation of the upper gastrointestinal tract:** This is a puncture of the esophagus, stomach or duodenum. This occurs rarely. If a perforation were to occur, surgery may be necessary to repair the hole.
- **Bleeding:** Significant bleeding may occur. This is rare but may require blood transfusions and other procedures such as surgery to stop the bleeding.
- **Pneumonia:** Oral secretions or stomach contents may get into the lung.
- **Dental damage.**
- **Risk of a heart attack or stroke.**
- **Death**

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](https://www.emmi.org), our online instructional video. This can be accessed through the Gastroenterology physician homepage at [kp.org/mydoctor](https://www.kp.org/mydoctor).
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.

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dosage</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

© 2012, The Permanente Medical Group, Inc. All rights reserved.
Santa Clara Health Education. Dept of Gastroenterology. (Revised 09-18)