

NPO Guidelines

Sedation is optional and in most cases is not necessary. Avoiding sedation has been shown to improve recovery as well as reduce complications. To reduce delays and cancellations, **BEFORE YOU LEAVE THE CLINIC, MAKE SURE YOU KNOW IF YOU ARE GETTING SEDATION.** IF you are **NOT** getting sedation, you may eat and drink up until the time of your appointment as normal and will not get an IV.

For patients who request **ORAL** sedation, we will need to send it in to your pharmacy for you to pick up prior to your appointment. You **MUST** have a driver (to and from the facility) with you and you may eat and drink up until the time of your appointment as normal. If choosing **ORAL** sedation, that must be the sole form of sedation on the day of your appointment.

For patients who DO request IV sedation, you will have to have an IV placed prior to the procedure and will be required to adhere to the following guidelines for your safety.

You may have solid foods and dairy products until 8 hours before your scheduled ***arrival time***. Take medications as normal with a sip of water.

Clear liquids can be consumed until 2 hours before the time you are scheduled to arrive at the clinic.

Clear, see-through liquids include:

- Water; Clear fruit juices such as apple juice and white cranberry juice
- Plain tea or black coffee (**NO milk or creamer**)
- Clear, electrolyte-replenishing drinks such as Pedialyte, Gatorade, or Powerade

Below is a **SAMPLE** table to help explain the timing of when to stop oral intake for **IV sedation procedures**. Look for the scheduled arrival time and when to stop eating solid food for an estimate. We encourage you to continue to drink clear liquids as you wish until 2 hours before arriving.

Arrival Time	Stop Solid Foods	Can Drink Clear Liquids Until
8 a.m.	Midnight	6 a.m.
10 a.m.	2 a.m.	8 a.m.
12 p.m.	4 a.m.	10 a.m.
2 p.m.	6 a.m.	12 p.m.

ANTICOAGULATION PROTOCOL GUIDELINES

Many pain management patients require management of anticoagulation therapy when undergoing interventional procedures. Maintaining a balance between hypercoagulation and hypocoagulation before, during, and after the procedure can be difficult.

The challenge is to minimize the risk of procedure bleeding while also minimizing the risk of thrombotic event that could occur by allowing hypercoagulability (tendency to clot too quickly).

**IF YOU ARE ON A BLOOD THINNER, MAKE SURE THAT YOU HAVE BEEN
INSTRUCTED IF YOU NEED TO STOP THESE MEDICATIONS FOR YOUR
PROCEDURE.**

Under NO CIRCUMSTANCE should a patient stop these medications without a physician. Just because you have stopped any of these medications in the past does not mean that you will not need to get clearance again.

PREPARING FOR YOUR PROCEDURE

. There are many things you will need to do to prepare for your procedure. We are providing this “procedure preparation” checklist as a helpful reminder. We want to help in any way that we can. If you have any questions regarding this information or need further assistance, please don’t hesitate to call our Office.

- Prior to your procedure one of our staff will be calling you before your procedure, to remind you about your procedure and answer any questions. They will also review any further pre-procedure instructions.
- Remember you must arrange to have a family member or friend accompany you to the clinic and stay at the clinic during your procedure if you are having sedation.
- We try to maintain a calm and quiet environment for our patients. Please arrange for babysitting if you have small children and limit the number of family members in the waiting room.
- Before your surgery or procedure, we will:
 - Verify your insurance and benefits
 - Attempt to pre-certify your procedure, if necessary
 - Send you notification if there are any problems with your insurance
 - Contact you the day before your procedure
- Before your procedure, you should:
 - Be sure to complete all pre-op testing (lab, X-ray, EKG) that your doctor may have ordered.
 - Please request clearances by your other healthcare providers if clearance is requested by your doctor.
 - Contact your insurance if you have any questions regarding your benefits.
 - Notify us of any changes that have been made to your insurance since scheduling your procedure.

THE DAY OF THE PROCEDURE

On the day of your procedure a receptionist will go over various forms that need to be completed and will collect any copayments. Please remember to bring a valid photo ID, your current insurance card and eyeglasses. Please remember not to wear any jewelry or contact lenses. Also, you must bring in a list of medications, with prescribed dose and frequency.

Arrange to have a family member or friend accompany you to the clinic and stay the entire time during your procedure if you will have sedation. This person must be available to speak with the physician if needed. If sedation will be given during your procedure you will not be able to drive, operate machinery or make critical decisions on the day of your procedure. Additionally, someone should stay with you for 24 hours after you get home.

A member of our staff will then escort you to the pre-operative area to put away your belongings. At this time, you will meet with the procedure staff who'll answer any questions you may have. Once all your questions have been answered you will be taken to the procedure area.

On the day of your procedure, you should:

- Remember to bring a valid photo ID, your current insurance card(s), your eyeglasses and your list of medications.
- Remember to wear loose, comfortable clothing and slip on shoes.
- No blankets, pillows or throws are allowed in the pre-operative area due to infection risk.

- Please shower the morning of the procedure to limit the infection risk during the procedure.
- Remember to leave valuables at home, including jewelry and contact lenses.

POST PROCEDURE INSTRUCTIONS

- Limit activity (nothing strenuous) the day of the procedure. You may resume normal activities the following day unless instructed otherwise.
- You may resume work the next day unless told otherwise by the physician.
- It may be several days, even up to 14 days, before you see improvement. For some patients, the pain may get worse at the day following the procedure before it gets better. This is not uncommon.
- The injection may last from a few days to many months following the injection, everyone and every case is different.
- If you are taking blood thinning medication and stopped them for this procedure you may resume taking the blood thinners the next day.
- If you had IV sedation or oral Valium, you cannot drive or drink alcohol for twenty-four hours. Do not sign important documents for 24 hours.
- Keep the band-aid clean and dry for 24 hours. Do not submerge the procedure site in water for the remainder of the day. (No swimming, bathing, or whirlpools) You may take a shower. You may remove the band-aid after 24 hours.
- For mild pain or tenderness at the injection site:
 - You may take acetaminophen (no NSAIDs) or your prescribed medication.
 - You may use a cold pack/ice at the injection site for 15 minutes 2-3 times per day over the next 3 days. Do not apply ice directly to the skin.
 - Nothing excessively hot should be placed on the injection site for 24 hours.
- Soreness, stiffness, mild bruising and muscle cramping occasionally occur at and around the injection site, this is normal.
- Signs of infection at the injection site: increased redness, drainage or swelling, pain at the injection site, fever/chills can be a sign of infection.
- Uncommon side effects (Red Flags) that you should let the clinic know about immediately:
 - Severe headache that is worse when standing upright.
 - Increased numbness and tingling in your arms or legs.

- Any new bowel or bladder incontinence.
- Post steroid injection common side effects:
 - Flushing or feeling of warmth, increased appetite, water retention, difficulty sleeping and increased menses may occur due to the steroids.
- If you are diabetic you should monitor your blood sugars with finger-sticks 3-4 times/day following the steroid injection and work with your primary care physician or endocrinologist with any problems you may have with high blood sugar levels. This is a side effect of steroids.

I have read and understand the pre and post procedure instructions, including NPO guidelines and anticoagulation instructions and have had the opportunity to discuss its contents with a member of the clinical staff.

Patient/Guardian Signature

Date