

Setting the new standard of care.

## **Anesthesia Special Instructions**

**Daily/Routine Medications**: Patients taking daily medications may take their medications at their normal times with a few small sips of water.

**Diabetic Patients undergoing Intravenous (IV) Sedation**: Patients with Diabetes should attempt to schedule their appointments in the morning when possible.

**For Non-Insulin Dependent Diabetics undergoing Sedation**: All oral agents (Metformin, Glipizide, Glyburide, etc...) should be stopped the morning of surgery and may be resumed at their regular dose and time after surgery.

**For Insulin Dependent Diabetics undergoing Sedation**: Take half the daily NPH Insulin dose the morning of surgery and do not take your regular insulin. After surgery, resume meals and normal NPH and Insulin regimens.

**For Patients Taking Blood Thinning Medications** (Coumadin/Warfarin, Plavix, Pentoxifylline, Pradaxa, Aggrenox, Effient, Xarelto, Eliquis, etc.): Prior to your procedure, a consultation with your regular physician will determine whether there is a need to temporarily stop your blood thinning therapy. Laboratory studies may be required to determine your current level of anticoagulant activity (for patients on Coumadin/Warfarin). If there is a need to discontinuation your blood thinner please follow the guidelines set forth by your primary care physician, cardiologist or other prescribing physician and **DO NOT** attempt to stop your anticoagulant therapy without your physician consent.

**For Patients currently taking or with a history of Bisphosphonate Therapy**: For patients with a history of the following medications Actonel, Boniva, Fosamax, Skelid, Didronel, Aredia, Zometa and Bonefos <u>please click here</u>.

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