

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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