



PRE-PROCEDURE INSTRUCTIONS

1. Please arrive 15 minutes before your procedure time.
2. If you are having a procedure in the head, neck or upper back, please DO NOT eat for 6 hours before the injection. You may have clear liquids up to 3 hours before the procedure (Clear liquids include: water, apple/cranberry juice, ginger ale, black coffee, or black tea but no milk, sugar, citrus juices, gum, or mints). If you are having a low back, trigger point, or joint injection, you may have a light meal prior to the procedure.
3. Do not wear any skin lotion prior to any procedure.
4. You may be asked to change into a gown. Please dress in comfortable, loose clothing and flat rubber soled shoes (please no heels or flip-flops).
5. You may take your medications as usual on the day of the procedure, except for:
_____see attached form for guidance on stopping blood thinning medications_____
6. Please notify us if you become ill or develop an active infection. If you develop a bacterial infection, **you must have completed antibiotic treatment and be free of infection for 2 days before a procedure can be done.**
7. You should arrange for a ride home after the procedure. You may not drive or operate machinery for 24 hours after a spinal procedure.
8. Expect to stay at least 15-30 minutes after the procedure, so that we may monitor you. If you are undergoing a Radiofrequency Lesioning procedure, please expect to stay **ONE HOUR after** the procedure for recovery. **You will be requested to remain in a wheelchair until we determine that it is safe for you to walk.**
9. After discharge, you will be asked to rest at home and place ice on the injection site. Please plan accordingly.
10. **DO NOT** stop any blood thinner unless your cardiologist or primary care physician (PCP) approves it.
11. If you are a diabetic and are having a steroid injection, you will need to follow your blood sugars closely for up to 3 weeks after the procedure. Contact your PCP if your blood sugars are elevated after the procedure.
12. If you will be taking a sedative for premedication, please arrive 30 minutes prior to your procedure.

[] Alprazolam as directed (Take 1 tablet 1 hour prior to procedure, then take 1 tablet as needed 30 min prior to procedure). Do not drive, operate machinery or make any legal decisions for 24 hours after taking the sedative.

If you have any questions, please call our office at 508-665-4344.

Your procedure is scheduled for _____ am/pm on _____

PLEASE SIGN BELOW THAT YOU UNDERSTAND YOUR PREPROCEDURE INSTRUCTIONS.

PATIENT'S NAME (PRINT):

SIGNATURE: **DATE:**