What you need to know about

ERCP/EUS ENDOSCOPY PROCEDURES

Endoscopic Retrograde Cholangiopancreatogram/Endoscopic Ultrasound

An **ERCP** is a type of procedure that uses an endoscope to examine the pancreatic and bile ducts. The endoscope used contains a light and a tiny camera at the end, and enables a contrast dye to be injected through a tube. The dye allows the doctor to look for blockages in the neighboring ducts. If problems are found, the



doctor can pass tools through the endoscope to open up blocked ducts, insert stents, or take tissue samples.

An **EUS** is a procedure that uses sound waves to examine the lining and walls of the gastrointestinal tract using a special endoscope with an ultrasound device at the tip. The ultrasound also enables doctors to study neighboring organs such as the biliary system and pancreas that lie next to the gastrointestinal tract. Depending on the area to be examined, the scope is inserted into the mouth or rectum.

Your medicine regimen may need to be modified, for your procedure. For your safety and health it is extremely important that you read the section below and let our office know whether you take any of the listed medications.

A physician's order is required before any prescribed medication is held, modified or discontinued in order to ensure your safety!

- Use breathing inhalers and take prescribed blood pressure, heart, anxiety, and depression medications on the morning of the exam, or your procedure may have to be canceled!
- Diabetic medications require modification by a physician to prevent low sugar reactions or unacceptable high glucose readings.
- Aspirin therapy may be continued for procedures.
- Discontinue Lovenox 12 hours before procedure.
- NSAIDS including Ibuprofen (Advil, Motrin), Naproxen (Aleve), Meloxican (Mobic), Excedrin, and Goody & BC powders should be discontinued if possible, for five days prior to procedure.

Certain medicines can cause bleeding problems.

Let our office know as soon as possible if you take any medications such as those listed to the right.

Do **NOT** stop taking medications without a specific physician order to do so. Do **NOT** smoke for 24 hours prior to your procedure. Examples include but are not limited to:

ANTIPLATELET AGENTS:

- Dipyridamole (Aggrenox[®], Persantine[®])
- Thienopyridines
 - ✓ Clopidogrel (Plavix[®])
 - ✓ Prasugrel (Effient[®])
 - ✓ Ticlopidine (Ticlid®)
 - ✓ Ticagrelor (Brilinta[®])

ANTICOAGULANTS:

- Warfarin (Coumadin[®], Jantoven[®])
- Fondaparinux (Arixtra®)
- Direct factor Xa inhibitors
 - ✓ Rivaroxaban (Xarelto[®])
 - ✓ Apixiban (Eliquis[®])
 - ✓ Edoxaban (Lixiana®, Savaysa®)
 - ✓ Betrixaban (Bevyxxa[®])
 - Direct thrombin inhibitors
 - ✓ Dabigatran (Pradaxa[®])
 - ✓ Desirudin (Iprivask[®])

OTHER:

Pentosan polysulfate (Elmiron[®])

DAY OF PROCEDURE

- Nothing by mouth after midnight on the day of your exam except for blood pressure medications or those directed by your physician. If your test is after 1:00PM, you may have clear liquids until 7:00AM. Drinking too closely to the exam may make it necessary to cancel the exam.
- Bring a driver. You will receive intravenous medicine to sedate you. Therefore, your exam WILL NOT be done unless you bring an ADULT companion 18 or older to drive you home. Your companion must stay at the facility during entire procedure. You will not be able to drive the remainder of the day.
- **Just in case.** If an abnormality such as a block in your bile duct is found during your test, you may need to be admitted overnight. Bring an overnight bag so you may have toiletries and a change of clothes with you.

