

# INJECTION INSTRUCTIONS

**\*\*\*To Schedule Procedure/Injection - Please call: 855-906-7246 Opt 1**

Your Procedure will be done under **Light Sedation** or **Local Anesthesia**.

**Precautions** are in place for **YOUR Safety**.

## **PLEASE READ THE ENTIRE DOCUMENT. THANK YOU!**

1. You may **NOT have anything to eat or drink 8 hours prior to the procedure; ESPECIALLY** if you are to have **sedation** of any kind. You may, however, take medication (**Blood Pressure or Heart**) with a small sip of water **IF NECESSARY**.
2. You **MUST** have a **friend or family member drive you home from your procedure**, regardless if **sedation is used or not**. This person must be identified prior to the procedure by the medical staff and available prior to your discharge.
3. If you have any **active skin infections, cold or flu symptoms, recent surgery or dental work**, please notify our staff **IMMEDIATELY**. We may need to postpone your procedure until it is safe to proceed.
4. Please make sure your **internist or cardiologist has approved the discontinuation** of these medications prior to stopping them:

**7 DAYS PRIOR COUMADIN, Plavix and Ticlid.** Please make sure that your **internist or cardiologist has approved the stoppage of your Coumadin**. Also, we may need a PT and INR, **24 hours prior to the procedure** from your **internist or cardiologist's office**.

**5 DAYS PRIOR** to your procedure: **Aspirin** or **Aspirin containing products, Fish Oil** capsules, **Ginko Biloba, Lixiana, and Vitamin E** capsules.

**3 DAYS PRIOR: Anti-inflammatory medications** including: **Advil, Aleve, Alka-Seltzer, Anacin, Anaprox, Arthrotec, Bayer, Butalbital, Clinoril, Daypro, Diclofenac, Dolobid, Ecotrin, Excedrin, Feldene, Fiorinal, Ibuprofen, Indocin, Indomethacin, Ketoprofen, Lodine, Midol, Mobic, Motrin, Naprosyn, Orndis, Pradaxa, Percodan, Piroxican, Relafen, Soma COMPOUND, Sulindac, Talwin, Toradol, Trisilate, Vicoprofen, Voltaren, and any Other medication not listed that has an Anti-inflammatory.**

**2 DAYS PRIOR: Eliquis, Savaysa, and Xarelto.**

5. You **MAY CONTINUE** taking the following: **Acetaminophen products, Celebrex, Endocet, Flexeril, Loratab, Morphine, Neurontin, Norco, Oxycodone, Percocet, Robaxin, Roxicet, Tramadol, Tylenol, Skelaxim, Soma, Ultracet, Ultram, and Vicodin.**
6. Please **continue taking all other medications**. If you are concerned about a certain medication that you are taking or need to reschedule/cancel your procedure please contact our office.
7. Please bring any **FILMS** with you the day of your procedure (MRI and/or CT-Scans on CD-ROM or standard film.)
8. **YOU MUST SCHEDULE A FOLLOW UP VISIT, 1-2 WEEKS** after your procedure.

**OFFICE POLICY: WE REQUIRE A TWO BUSINESS DAY NOTICE TO CHANGE OR CANCEL YOUR APPOINTMENT. SAME DAY CANCELLATIONS OR NO SHOWS WILL BE SUBJECT TO A FEE OF \$500.**

## **PROCEDURE LOCATIONS**

### **DOCS**

8436 W. 3<sup>rd</sup> St. Ste 700  
Los Angeles, CA 90048

### **FULLERTON SURGERY CENTER**

2240 N HARBOR BLVD. #100  
FULLERTON CA, 92835