

chew during this 4 hour time frame.

Birns, Gloger, Witten & Bhinder, MD

Patient Name:	
	INSTRUCTIONS FOR IRC PREPARATION (Infrared Coagulatory) Ultroid Device WITH SEDATION
Date:	Time of Procedure:
Time of Prep:	Arrival Time:
Location:	Urbana GI Endoscopy Center – 3280 Urbana Pike # 104 Phone Number 240-436-6440
	GIEA- 15005 Shady Grove Rd # 200 Phone Number 301-340-8099
	Birns, Gloger Witten & Bhinder MD – Rockville office 9711 Medical Center Drive # 308 – 301-251-1244
	Birns, Gloger Witten & Bhinder MD – Urbana office 3280 Urbana pike # 204 – 301-810-5252
	neone drive you home . If you plan to take a taxi home, you must have someone accompany dy to be discharged ½ to 1 hour after your procedure is complete.
Please do not use an inflammatory type n be used sparingly du Persantine (dipridam medications for three discontinued, so be s	y aspirin or aspirin products one (1) week prior to you procedure. Nonsteroidal antinedications (such as Ibuprofen, Relafen, Voltaren, Indocin, Vioxx, Celebrex, Advil) should uring the three (3) days prior to your procedure. Also, If you take Coumadin (warfarin) or nole), Plavix, or Aggrenox, consult with your prescribing doctor about stopping these et (3) days prior to your procedure. There may be other medications that should be sure to consult your doctor with any other questions about prescription drugs you may be et Tylenol if necessary.
YOU WILL NEED Two (2) Fleets Ener	na (green and white box)
	OURE Cocedure use one (1) Fleets Enema; please follow the directions on the box. Thours before leaving for your appointment use the remaining Fleets Enema.
	tally fasting 4 hours before the procedure. This means you may have nothing to eat, new 4 hours prior to the procedure.

To avoid the risk of a delay or a cancelled procedure, please be very careful to not eat, drink smoke or

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