

Endoscopic Retrograde Cholangio Pancreatography (ERCP) Prep Instructions

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7 days prior
to ERCP



Patient Responsibilities

- Continue taking all your regular medications.
- **Check the special notes section on page 2 for detailed information on medical conditions and/or medications that may impact your procedure and take all necessary actions.**
- Arrange a driver who can bring you to the hospital, drive you home, and monitor you at home after the procedure. You will not be allowed to drive, take a bus, take a taxi, or leave the facility alone after receiving sedation. If you do not have someone to sign you out, drive you home, and monitor you at home afterwards, your procedure will need to be rescheduled.

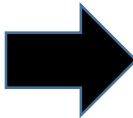
The night
before ERCP



Patient Responsibilities

- **No solid food after midnight the night before your procedure.**
- You may continue to drink water or other clear liquids overnight and up until 2 hours prior to check in at the endoscopy center. See list of approved clear liquids on page 3.
- **Diabetics should check the special notes section on page 2 for guidance on blood sugar management.**

Day of ERCP



Patient Responsibilities

- You may continue to drink clear liquids up until 2 hours prior to check in.
- You may take your regular medications up until 2 hours prior to check in (**exception: any medication listed in the special notes section, see page 2**)
- **2 hours prior to check in-STOP drinking everything, including water.** Do not use gum, mints, hard candy, or lozenges. You may brush your teeth but do not swallow any water.

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Special Notes for Patients on Blood Thinning Medications

- **ALL prescription blood thinners will need to be stopped prior to procedure, no exceptions.** It is your responsibility to call the provider who manages your blood thinners ASAP for guidance on how and when to stop taking them. Do not stop taking your blood thinners without consent from your prescribing provider.
- Some common prescription blood thinning medications: clopidogrel (Plavix), warfarin (Coumadin), ticagrelor (Brillinta), prasugrel (Effient), rivaroxaban (Xarelto), dabigatran (Pradaxa), apixaban (Eliquis), dipyridamole (Aggrenox), fondaparinux (Arixtra), dalteparin (Fragmin), cilostazol (Pletal), enoxaparin (Lovenox), edoxaban (Savaysa), or ticlopidine (Ticlid).
- Aspirin 81-325 mg/day and is safe to take up to and after your procedure.
- Prescription pain medications and Tylenol are safe to take in the days leading up to procedure and the day of procedure.
- If you routinely see a cardiologist, please call their office and ensure you have medical clearance to receive anesthesia. For your safety, anesthesia providers may request a medical clearance letter from your cardiologist.

Special Notes for Diabetic Patients

- All diabetic medications (pills, insulin, and injectables) should be reduced in dose by half the morning of your procedure. Check your blood sugar frequently during this time. It is a good idea to have some non-diet clear liquids, such as apple juice, on hand in case your blood sugar drops.
- See “Other Medication Notes” for guidance on GLP-1 medication (medication name ends in “-tide.”)
- If you typically have issues controlling your blood sugars or have questions about your diabetic medications, we highly recommend contacting your endocrinologist or primary care provider for guidance on how to best manage your blood sugar.

Other Medication Notes

- **If you take the following medications:** iron supplements, fish oil, or vitamin E, please **STOP** taking these 7 days prior to your procedure.
- Prescription pain medications, Tylenol and ibuprofen/naproxen/diclofenac/meloxicam (NSAIDs) are safe to take leading up to and after your procedure.
- **GLP-1 medication is most often prescribed for diabetes and weight management. Regardless of the reason why you take this medication, you will need to STOP this medication prior to your procedure due to increased risk of aspiration when sedated.** Examples include: dulaglutide (Trulicity), exenatide (Byetta or Bydureon), liraglutide (Victoza or Saxenda), Lixisenatide (Adlyxin), Semaglutide (Ozempic, Wegovy or Reyblsus), and tirzepatide (Mounjaro.)
 - If you are on daily dosing, hold GLP-1 medication the day of the procedure. You can resume after procedure.
 - If you are on weekly dosing, hold medication starting 7 days prior to the procedure. You can resume after procedure.
 - If your GLP-1 medication is prescribed for diabetes management and held for more than 7 days, ask your prescribing provider for bridging anti-diabetic therapy to avoid high blood sugars.
 - If you are taking any medication for weight loss, regardless of the medication this needs to be stopped 7 days prior to procedure. You can resume after the procedure.

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Approved clear liquids to drink up until 2 hours prior to check in: water, clear juices without pulp such as apple or white grape, clear broths, sodas, sports drinks, coffee without cream (sweetener is OK), tea without cream (sweetener is OK), powdered or liquid water enhancers such as Crystal Light. Try to avoid **RED**, **BLUE**, or **PURPLE** colored liquids. **Do not drink any alcohol, dairy products, nut milks, creamers, cocoa, or opaque liquids of any kind.**

What to expect at the endoscopy center

Before	During	After
<ul style="list-style-type: none"> You will check in through hospital registration and be called back into the patient care area by the Endoscopy staff. A nurse will go over your health history, medications, and get you ready for the procedure. Your GI doctor will meet with you to discuss the procedure, any symptoms or concerns you may have, and answer your questions. Your anesthesia provider will meet with you to discuss the procedure, your health history, and answer any questions you may have. 	<ul style="list-style-type: none"> You will be wheeled into the procedure room and move yourself into a left side lying position. Once you are sedated, your GI doctor will perform your procedure. Any abnormalities he encounters will be removed or biopsied at that time. The procedure usually takes around 30 minutes and most patients spend 3 hours at the endoscopy center, check in to check out. 	<ul style="list-style-type: none"> You will wake up in the recovery area. Once you are awake, your GI doctor will meet with you again and go over the details of the procedure with you, including pictures. A nurse will get you ready to go home and go over your discharge instructions with you. You cannot drive for 24 hours after receiving sedation. You may have some pain in your chest and throat from the procedure. This is normal and can be expected to last for a few days. The medications prescribed to you will help this pain. Rest for the remainder of the day and make sure you have someone checking on you regularly. You may return to normal activities the next day.

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How to contact us

- Multicare Rockwood Digestive Health office **509.755.5220** M-F 8:00am-5:00pm.
- **If you are unable to keep this appointment, please be courteous and cancel or reschedule as soon as possible so we can fill your slot with one of our many patients waiting for an appointment. Call the Digestive Health office at 509.755.5220, option 1 for scheduling.**
- For questions regarding check in times, hospital visitor restrictions, directions to the endoscopy centers, or other issues pertaining to procedure, please call your assigned endoscopy center.

Deaconess Hospital Endoscopy

910 W 5th Ave, suite 500
Spokane, WA 99204

509.603.4877

Valley Hospital Endoscopy

12606 E Mission Ave
Spokane Valley, WA 99216

509.603.5023

If you develop cold/flu symptoms or test positive for Covid prior to your procedure date, please call our office. Unfortunately, you will likely need to be rescheduled.