Your procedure will take place at:

Rhode Island Hospital, 593 Eddy St, Providence, RI - Main Bldg., 9th Floor, 9B Endoscopy Unit

**Please Note**: The office will call 1 week prior to your appointment to confirm your date and official time.

## **ERCP INSTRUCTIONS**

(Endoscopic Retrograde Cholangiopancreatography)

Name:	 		-
Date of Procedure:	 	_	
Performing MD:			

PLEASE REPORT DIRECTLY TO THE MAIN BUILDING OF RHODE ISLAND HOSPITAL 9B RECEPTION AREA. PLEASE PARK IN FRONT OF RHODE ISLAND HOSPITAL IN THE EDDY STREET LOT.

PLEASE BRING A CURRENT LIST OF MEDICATIONS YOU ARE TAKING WITH YOU TO THE HOSPITAL.

- Please arrive 45 minutes before your scheduled appointment time.
- Expect to be at the Hospital Endoscopy Suite at least 2-3 hours.
- You must NOT work or drive the day of the procedure.
- If you are currently taking medications, please call the office ONE WEEK prior to the procedure.

**ASPIRIN** products should be stopped one week prior to the procedure. This includes Advil, Motrin, Aleve, Naprosyn or other anti-inflammatory medications.

DO NOT HAVE ANYTHING TO EAT, DRINK OR SMOKE FROM MIDNIGHT THE NIGHT BEFORE THE PROCEDURE.

PLEASE MAKE ARRAGEMENTS TO HAVE SOMEONE DRIVE YOU HOME BECAUSE YOU WILL BE MEDICATED FOR YOUR PROCEDURE. IF YOU ARE TAKING PUBLIC TRANSPORTATION YOU MUST BE ACCOMPANIED TO YOUR HOME BY A RESPONSIBLE PERSON.

YOUR PROCEDURE WILL BE CANCELLED IF YOU DO NOT HAVE TRANSPORTATION HOME.

**Questions please call office at 401-606-4260**