

# HOMEIRA MEHRABIAN , M.D.

## ENDOSCOPY PREPARATION

**If you are taking blood thinners that were prescribed to you such as, Warfarin, Eliquis, Xarelto, Plavix, Prasugrel, Brilinta, Cilostazol or Aggrenox, we will need to obtain clearance from the prescribing physician to stop the medication 5-7 days prior to your procedure and we will notify you of recommendations to stop.**

**If you are taking medications that would thin out your blood, including over the counter medications such as;**

**ASPIRIN, ADVIL, ALEVE, MOTRIN, FISH OIL, VITAMIN E, LOVENOX, CELEBREX, IBUPROFEN, NAPROXEN, BEXTRA, MOBIC, TICLID, TICAGRELOR, TICLODIPINE, DIPYRIDAMOLE, INDOMETHACIN, DICLOFENAC, ETODOLAC, FENOPROFEN, FIORINOL, KETOPROFEN, KETOPROFEN, KETOROLAC, MELOXICAM, TORADOL AND ANY PRODUCTS CONTAINING IBUPROFEN.**

**You will need to stop the above medications 7 days prior to your procedure**

- You are to have nothing to eat after midnight, the night before the exam. Water is OK to drink up until 4 hours prior from check in time.

**If you are taking any weight loss medications or GLP-1s (please review the next page), stop your medication 2 weeks prior to your procedure. Stay on a clear liquid diet the day prior to your procedure**

- Please arrange for a driver to take you home on the day of your exam (someone you know).
- If you are diabetic and take diabetic medications, CALL YOUR PRIMARY CARE PHYSICIAN for instructions about the medications.
- DO TAKE your regular medications like blood pressure and heart medications the morning of your procedure.

**\*\*IF YOU MAY HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CALL OUR OFFICE\*\***

Phone: 949-791-7155

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## Special Instructions

### **if you use any Weight Loss Medications/ GLP-1s**

**(ex. Oxempic, Mounjaro, Wegovy, Trulicity, etc)**

The ASA came out with new guidance that suggests withholding use of medications like Wegovy, Mounjaro and Ozempic, Trulicity, etc... prior to surgery to reduce the risk of complications associated with anesthesia. **There may be other GLP-1s not mentioned, as there are new ones coming up.**

Because of the delayed gastric emptying, we're finding more and more people are arriving for surgery with basically full stomachs, and that's the one thing we don't want when we're doing an elective operation.

Not stopping the use of these drugs several weeks prior to any procedure requiring anesthesia can increase the risk of regurgitation and aspiration of food into the airways and lungs before or during surgery.

If food from the stomach comes back up the esophagus and into the back of your throat, it can make its way into your lungs and potentially lead to pneumonia.

With this in mind, we recommend that

### **For a Colonoscopy**

Stop your medication 2 weeks prior to your procedure

Complete your COLO prep as directed

### **For Upper Endoscopy (EGD)**

Stop your medication 2 weeks prior to your procedure

Stay on a clear liquid diet the day prior to your procedure.

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## **EGD RISKS INCLUDE:**

PERFORATION RATE OF 0.03-0.1%, BLEEDING RATE 0.03%, RESPIRATORY DEPRESSION AND CARDIOPULMONARY EVENTS DUE TO SEDATIVES (0.4%). PERFORATION IS HIGHER WITH DILATION OF ESOPHAGUS (0.4%), PYLORIC STENOSIS (0.5%), GASTROENTEROSTOMY (2.2%), GASTRIC STAPLE LINE