



**YOUR PROCEDURE FOR**

**IS SCHEDULED ON:**

**YOU SHOULD ARRIVE AT:    PROCEDURE TIME:**

- Please check in at the Out Patient registration desk at Capital Medical Center  
Next to the emergency room - (360) 754-5858
- Please check in at the main registration desk in the front lobby of St. Peter Hospital - (360) 491-9480

§ You will be sedated for the procedure. You will not be able to drink alcohol, drive, sign legal documents, or work with machinery on the day of your procedure.

§ Please make arrangements for someone to drive you to and from the procedure and to escort you to and from the facility. A bus or taxi is not acceptable.

§ Please do not eat or drink anything after midnight.

§ Take your medications as prescribed with sips of water, unless otherwise directed.

§ Please take 1/2 your insulin dosage the morning of the procedure.

§ Hold these medications:

§ Other instructions:

**In the event you are unable to make your appointment, please notify us 24 hours in advance of your scheduled time. You can reach the clinic at (360) 754-1737 to confirm or cancel your appointment.**

**Please read the information in this packet prior to your procedure. If you have any further questions please feel free to contact our office prior to your scheduled appointment at (360) 754-1737.**

**Reviewed with patient/family:    Date: 5/25/2017 Initials:**

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**Doctor:**

**Nurse: CSHANNONA**