

PATIENT CARE PROCEDURE INFORMATION

A procedure has been selected as an option for you to help manage your pain and concerns. With regional treatments, whether surgery or interventions like injections or radiofrequency, precautions must be taken to allow for the best possible outcome.

OVER-ARCHING RECOMMENDATIONS:

- Each facility location for the injection will reach out to you prior to your appointment generally the day before to give you the exact time of your procedure and when to arrive.
- It is important to talk to the facility about your ability to eat and drink prior to the procedure. Some surgeries require you to be without food or drink for up to 6 hours before.
- It is recommended to have a driver if you are undergoing a surgery. For simple interventions, you may drive yourself.

AVOIDANCE OF BLOOD THINNING MEDICATIONS (ANTICOAGULANTS)

Sometimes it is necessary to stop certain medications that may interfere with your blood's ability to clot to reduce the likelihood of bleeding complications with your procedure. These are oftentimes procedures on the spine (cervical, thoracic, and lumbar). These medications are listed in the table below. Please alert your provider if you are on any of these medications. Based on the procedure, your medications may need to be restarted at different times. Your provider will describe when to restart your medications.

AFTERCARE INSTRUCTIONS

After your procedure, you may have specific instructions on what to do or not to do. These will be provided on the day of the procedure. Please ask your provider if you have any questions.

QUESTIONS:

As always, and at any time, please feel free to call us if you have any questions or concerns, at 844-527-7369. At Evolve, we want you to do well.

Agent	Half-Life (hours)	Recommended Discontinuation Time (Days)
Diclofenac	1 to 2	1
Etodolac	6 to 8	2
lbuprofen	2 to 4	1
Indomethacin	5 to 10	2
Ketorolac	5 to 6	1
Meloxicam	15 to 20	4
Nabumetone	22 to 30	6

Naproxen	12 to 17	4
Oxaprozin	40 to 60	10
Piroxicam	45 to 50	10

Non Steroidal Anti-Inflammatory Drugs (NSAIDS)

Medications	Recommended Discontinuation Time		
NSAIDS	See chart above		
Aspirin	6 days (can consider 4 days in cardiovascular patients taking ASA for secondary prophylaxis)		
Phosphodiesterase Inhibitors			
Cilostazol (Pletal)	2 days		
Dipyridamole (Aggrenox)	6 days		
ADP Receptor Antagonists			
Clopidogrel (Plavix)	7 days		
Prasugrel (Effient)	7-10 days		
Ticagrelor (Brilinta)	5 days		
Warfarin	5 days and normalized INR		
IV Heparin	4 hours		
Subcutaneous Heparin	8-10 hours after last dose (Avoid procedures in patients on TIO dosing)		
LMWH (Enoxaparin)	12 hours for prophylactic dose, 24 hours for therapeutic dose (Img/kg)		
Factor Xa Inhibitors			
Fondaparinux (Arixtra)	3-4 days		
Rivaroxaban (Xarelto)	3 days		
Apixaban (Eliquis)	3 days		
Dabigatran (Pradaxa)	4 days, 6 days in patients with ESRD		
Glycoprotein Ilb/Illa Inhibitors			
Abciximab (Reopro)	2 days low risk procedures, 5 days medium/high risk procedure		
Eptifibatide (Integrillin)	24 hours		
Tirofiban (Aggrastat)	24 hours		
Fibrinolytic/Thrombolytic Agents	48 hours minimum		
Herbal Agents (Ginseng, Garlic, Ginko, Danshen, Dong Quai)	7 days		