

Mile High Sports and Rehabilitation Medicine, PC

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Ph: 303-331-6744 Fax: 303-331-6839

Pre-Procedure Instructions

1. Make sure you have advised your physician of **ANY and ALL allergies** well as any medications or herbal remedies that you are taking.
 2. If you are on a blood thinner (Coumadin, Warfarin, Jantoven, Plavix, and others), you cannot have an injection. Inform your physician if you are taking any blood thinners. **If you are taking Aspirin or any products containing Aspirin**, notify your physician as you may need to discontinue these 10 days prior to your procedure.
 3. If you are taking medication for blood pressure or blood sugar, continue these medications as prescribed.
 4. **DO NOT** take any non-steroidal anti-inflammatory medications (*Advil, Ibuprofen, Aleve, Motrin*, and others) for 3-days (72 hours) prior to the procedure. You may take *Tylenol (Acetaminophen)*
 5. Advise the doctor or nurse if you are being treated for any infection or if you felt you may be acutely sick (fever, chills, nausea, vomiting, diarrhea, etc.)
 6. If you have an implantable neuro-stimulator device, the electronic device needs to be turned-off prior to your procedure. This does not apply to pacemakers or internal defibrillators for your heart.
 7. **DO NOT** eat any solid food or drink any liquids for eight (8) hours prior to your procedure. If you need to take prescribed medication prior to the procedure, notify your doctor or nurse and be sure to only take the medication with water
 8. **DO NOT** have any dental work completed 5 days prior to your procedure. This includes teeth cleaning.
 9. All jewelry must be removed prior to your procedure. This includes all piercings. Please leave jewelry and other valuables at home rather than bringing them to the surgery center.
 10. You must arrive at the Surgery Center **one (1) hour prior** to your scheduled procedure
 11. Please have a ride scheduled after the procedure. **You will not be released from the Surgery Center without a ride home.** You will not be capable of driving immediately following your procedure. You will receive anesthesia or other relaxation medications prior to your procedure and, local anesthetic used during the procedure may cause numbness and tingling impairing your ability to drive or operate machinery. You **WILL NOT** be released to UBER, LYFT, or another taxi service.
 12. During the Check-in process at the Surgery Center, you will be asked to sign a Procedure Consent Form. The procedure will not happen if the Consent Form is not signed
 13. Upon discharge, you will be provided with Post Procedure Instructions
 14. You will be scheduled for a follow-up appointment after your procedure to discuss any concerns and to review the outcome of the procedure. **This is a required appointment.**
- If you have any additional questions regarding your scheduled procedure, please contact the main office at (303) 331-6744 and speak with your doctor or medical assistant prior to your scheduled procedure.
 - Failure to arrive at the Surgery Center one (1) hour prior to your scheduled procedure may result in the cancelation or delay of your procedure.
 - **PAYMENT:** Any co-pay, co-insurance or deductible is required to be paid prior to your scheduled procedure date. Any remaining patient balance after your insurance has processed your claim will be billed to the address on file. Procedures cancelled with less than three (3) business day notice will be assessed a No Show/Cancellation fee in the amount of \$75.00.
 - For directions to the Surgery Center, as well as facility contact information, please visit our website at www.mhsrm.com or contact the clinic at (303) 331-6744.

Patient Information

Patient Name: _____

Procedure: _____ Surgery Center: _____

Procedure Date: _____ Arrival Time: _____ Start Time: _____

Follow-up Date: _____ Time: _____ Contact Concentra to schedule follow-up

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List of Medications that must be DISCONTINUED 10 Days Prior to Procedure. DO NOT discontinue any medications without prior discussion with your physician.

Effient
Rivaroxanan
Pradaxa/Dabigatran
Etelixate
Suboxone
Aspirin
Coumadin/Warfarin
Heparin
Lovenox/Enoxaparin
Plavix/Clopidogrel
Fragmin/Dalteparin
Innohep/Tinzaparin
Aggrenox/Dipyridamole

If you are taking any of the above medications, please notify the provider at Mile High Sports and Rehabilitation immediately. The above medications must be stopped **10 Days** before your procedure(s) and will require approval from the prescribing provider that it is appropriate to discontinue therapy prior to your procedure.

List of Medications that must be DISCONTINUED 72 Hours Prior to Procedure

Aleve	Percodan
Anacin	Persantine/Dipyridamole
Advil	Trental/Pentoxifyline
Celebrex/Celecoxib	Toradol/Ketorolac
Clinoril/Sulindac	Orgarin
Daypro/Oxaprozin	Lodine/Etodolac
Fiorinal/Butalbital	Motrin/Ibuprofen
Diclofenac/Cambia/Flector	Nuprin
Eliquis	Relafin/Nabumetone
Feldene/Piroxicam	Fish Oil
Ticlid/Ticlopidine Hydrochloride	Garlic
Indomethacin	Ginko
Ketorolac/Toradol	Ginseng
Mobic/Meloxicam	Glucosamine
Naproxen/Naprosym	Vitamin E
Pamprin	Voltaren/Voltarol/Cataflam/Zipsor