



Physicians Name: _____

Procedure Date: _____

Arrival Time will be given 48 hours prior to procedure

Procedure Locations:

**David H Koch Building
Endoscopy Center**
1283 York Avenue, 8th Floor
New York, NY 10065

**New York Presbyterian
Hospital**
Central Endoscopy Suite
525 East 68th Street, 2nd Floor
Greenberg Pavilion
New York, NY 10065

**Lower Manhattan Hospital
Endoscopy Suite**
170 William Street,
2nd Floor
New York, NY 10028

CANCELLATION

Scheduling procedures requires careful planning between the staff, doctors, and hospital. To help avoid delays, it is important that you follow the schedule. If you must reschedule or cancel, please call us at least 3 days prior to the procedure at 646-962-4000 or email us at endoscopyquestions@med.cornell.edu. Thank you for your help and consideration.

What is an ERCP ?

ERCP is a procedure that enables your doctor to examine and treat problems in the pancreatic and bile ducts. The doctor passes a thin tube called an endoscope through your mouth and stomach into the first part of the intestine, where the opening into to the bile and pancreatic ducts is located. The doctor inserts wires and/or catheters through the endoscope in order to treat blockages or stones affecting this area.

Important Contact Info

- If you have questions about your procedure or preparation, call 646-962-4000 Monday-Friday (excluding holidays) 9:00 a.m. – 5:00 p.m.
- If you are calling Monday-Friday after 5:00 p.m., during the weekend, or on a holiday, the on-call physician will reach out. If not urgent, you will be answered the next day.
- If you need to reschedule your exam for any reason, please call 646-962-4000
- If you need medical help now, call **911** or go to the nearest **Emergency Room**.



**IMPORTANT PLEASE READ DIRECTIONS CAREFULLY
AT LEAST 10 DAYS BEFORE YOUR PROCEDURE!**

ARE YOU TAKING ANTI-PLATELET MEDICATIONS or BLOOD THINNERS?

If you take blood thinners (Coumadin, Plavix, Pradaxa, Lovenox, etc), ask your prescribing doctor if you should stop these medications before your ERCP. Please notify our endoscopy nurse at **646-962-4000** if your doctor has recommended you **should not** stop this for your ERCP.

Commonly prescribed medications:

warfarin (Coumadin®)
dalteparin (Fragmin®)
tinzaparin (Innohep®)
enoxaparin (Lovenox®)
clopidogrel (Plavix®)
cilostazol (Pletal®)
dabigatran (Pradaxa®)

apixaban (Eliquis®)
rivaroxaban (Xarelto®)
prasugrel (Effient®)
ticagrelor (Brilinta®)
edoxaban (Savaysa®)
Heparin

DO NOT STOP YOUR ASPIRIN UNLESS INSTRUCTED TO DO SO BY YOUR DOCTOR

Do you have a Cardiac defibrillator (AICD) or a permanent pacemaker (PPM) Or Current Cardiac issues?

A **clearance letter** from your cardiologist is required at least 1 week before the procedure. Cardiac issues include any history of heart attack, chest pain, difficulty breathing or fainting episodes. If you have a **PPM** you will need to provide the most recent **interrogation report** (within 12 months), **AICD** (within 6 months).

Do you have Diabetes? Or on Weight loss medications?

If you are taking insulin or oral hypoglycemic pills, you should check with your prescribing doctor at least one week before your procedure for instructions on managing your medications the day before and morning of the procedure.

IF you are on SGLT2 inhibitors Ertugliflozin (Steglatro) Canagliflozin (Invokana) Empagliflozin (Jardiance) Dapagliflozin (Farxiga)

HOLD THREE DAYS PRIOR TO PROCEDURE

IF you are on a GLP-1 receptor agonist

Daily - (Liraglutide (Victoza®, Saxenda®) Exenatide (Byetta®) Semaglutide oral tablet (Rybelsus®)) –

HOLD DAY OF PROCEDURE

Weekly (Dulaglutide (Trulicity®) Exenatide (Bydureon BCise®) Semaglutide injection (Ozempic®, Wegovy®) Mounjaro

HOLD ONE WEEK PRIOR TO PROCEDURE

DO YOU HAVE HYPERTENSION?

Blood pressure medication, with the exception of diuretics (water pills), should be taken as usual on the day of the exam with a sip of water. Diuretics are not taken on the morning of the procedure.

If you have any questions about your medications or the prep, please call 646-962-4000.

ERCP Preparations Instructions

Seven Days Before Your Exam

Call the nurse if you have any questions about your exam, and what medications you need to stop. Ensure you have all clearances from your physician if required to do so.

The Day Before Your Exam

No solid food After MIDNIGHT

Stop eating all food.



IF you are on a GLP-1 receptor agonist: You should be on a clear liquid diet for the entire day.

You may continue to have clear liquids until 2 hours before your appointment.

You can only have **clear liquids**, such as Jell-o, popsicles, broth, tea, black coffee, and juice.

The rule is if you can see through it you can drink it. **NO MILK OR CREAMERS**

You cannot eat solid food until AFTER your exam

2 hours Before Your Exam

STOP everything. Do not drink or eat anything, including water, until your ERCP. This includes mints or candies.

Note: If you drink or eat anything your procedure will be cancelled

You may take your regular medications, unless instructed otherwise by a doctor with, a small sip of water.

Clear Liquids

ACCEPTABLE CLEAR LIQUIDS FOR HYDRATING

Water	Ginger ale and other Sodas
Black coffee or tea	Clear juices such as apple or white grape juice
Clear broth or bouillon	Plain Jell-O
Sports drink	Frozen juice popsicle

LIQUIDS MUST NOT BE RED OR PURPLE. DO NOT CONSUME ANY ALCOHOL, JUICE PULP, MILK, CREAM, SOY OR NON-DAIRY CREAMER, OR OTHER LIQUIDS YOU CANNOT SEE THROUGH UNLESS ON THE LIST ABOVE.

You can buy these as needed from the Grocery Store

1 box Chicken Bouillon/broth

(No noodles or solids in the broth)

1 box Jell-o/gelatin

(No flavors with red coloring)



1 bottle Ginger Ale or Clear Juice

(Any brand)

1 Box popsicles

(No flavors with red coloring)



WHAT TO EXPECT – DAY OF ERCP

Upon arrival, there will be multiple forms for you to sign and hospital staff will ask you to state and spell your name and date of birth several times.

After changing into a hospital gown, an intravenous (IV) catheter will be placed. An anesthesiologist will review your medical history. Your doctor will explain the procedure in more detail including any risks and answer any questions you have.

You will be brought into the procedure room and equipment to monitor your heart, breathing, and blood pressure will be attached. You will receive oxygen through your nose. You will be administered anesthesia through your IV, which will make you fall asleep. You may be given a suppository to reduce the risk of pancreatitis (inflammation in the pancreas). You may also have a stent inserted as a part of the procedure.

IMPORTANT! Due to hospital policy, you must have someone who is 18 years or older pick you up and escort you home after your procedure.

The procedure cannot begin until this arrangement has been confirmed by our staff. If we are unable to confirm, your appointment will be cancelled.

We estimate that you should be ready to be picked up approximately 3-4 hours from your scheduled procedure time.

If you don't have anyone to escort you home, please let us know and we can provide you with information on service agencies that will accompany you (at cost).



AFTER YOUR PROCEDURE: In the recovery room

You will wake up in the recovery room. Some people may feel bloated or have stomach cramps after an endoscopy. This is normal and goes away by passing gas. To minimize the risk of pancreatitis, your doctor may order fluids to be given. This may prolong your stay in the recovery area. Once you are fully awake, your nurse will remove your IV. Your doctor will then discuss your procedure results. Your nurse will explain your discharge instructions before you go home.

AT HOME:

If you had a biopsy, the results will be available in 7-10 days. Please refrain from drinking alcoholic beverages for 24 hours after your procedure. Avoid carbonated beverages, raw fruits, and salads at your post-procedure meal. You may resume your normal diet and activities the next day. You will have a follow up appointment set up 2-4 weeks after the procedure, this will ensure that we review all results with you and book a follow up procedure, such as stent removal or exchange if needed.

CALL YOUR DOCTORS OFFICE IF YOU HAVE:

- A temperature of 101° F (38.3° C) or higher
- Severe stomach pain or increasing size and firmness of your abdomen
- Heavy bleeding from your rectum that lasts more than 24 hours
- Weakness, faintness, or nausea/vomiting

