Interventional Radiology: Image guided Liver Biopsy

<table>
<thead>
<tr>
<th>Name:_____________________ Date:___________ Time:________</th>
<th>Buck Pavillion 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notify your physician if you are using Coumadin, aspirin or other blood thinners and Insulin</td>
<td></td>
</tr>
<tr>
<td>Please remember to arrange for a responsible person to drive you home from the procedure.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5 Days before</th>
<th>3 days before</th>
<th>2 days before</th>
<th>Procedure day</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Car] Please remember to arrange for a responsible adult to drive you home.</td>
<td>![Car] Remember to arrange your ride home.</td>
<td>![Plane] If you need to change or cancel your appointment please call the Angio Scheduler at (206) 341-0173</td>
<td>![Pill] Take your medications with water in the morning.</td>
</tr>
<tr>
<td>![Stop] If you are using Aspirin, Plavix, Aggrenox or ibuprofen STOP today.</td>
<td>![Stop] If you are using Coumadin follow your physician or anticoagulation nurses instructions to STOP TODAY</td>
<td>![Stop] You will receive a phone call today from the Radiology Nurse to go over your preparation instructions and answer any questions you may have.</td>
<td>![Clock] No solid food 6 hours before your procedure.</td>
</tr>
<tr>
<td>![Stop] If you use Coumadin contact the Anticoagulation Clinic nurse for instructions to stop. If you did not receive these instructions, please call your physician or the Radiology Clinic RN at (206) 341-0152.</td>
<td></td>
<td></td>
<td>![Check] If you are Insulin dependent follow your doctors orders to regulate your dose.</td>
</tr>
<tr>
<td>![Clock] Allow 3 to 4 hours for your recovery.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Clear liquids up to 2 hours before your procedure.*