Pre-Operative & Bowel Preparation Instruction Sheet

Medications & Herbal Preparations:

It is estimated that up to one-third of all patients are taking herbal preparations and over-the-counter medications. Some of these preparations, both alone and in combination, may interfere with your surgery and post-operative recovery. Below is a list of those medications that should clearly be avoided, if possible, starting at least 7 days prior to your scheduled surgery:

Preparation	Potential Adverse Event	
Aspirin (Extra-strength Tylenol is permitted.)	Bleeding problems	
Motrin, Advil & other nonsteroidal anti-inflammatory agents	Bleeding problems	
Echinacea	Liver problems	
Ephedra or ma huang	Cardiac problems & blood clots	
Garlic or ajo	Bleeding problems & low blood pressure	
Ginkgo, duck foot tree, maidenhair tree or silver apricot	Bleeding problems	
Ginseng	Lower blood sugar	
Kava or Piper methysticum	Sedative effects	
St. John's Wort, amber, goat weed, hardhay, klamatheweed or Hypericu	Increased breakdown of many medications	

Bowel Preparation:

A bowel prep is indicated when the small or large intestine may have scarring around it making injury to the intestine during surgery more likely. An unprepared bowel (intestines containing partially digested food and fecal material) may leak bacteria and stool if a puncture occurs during the surgery. This leakage of bacteria and subsequent infection may require that a colostomy (temporary collection bag for stool attached the abdominal wall) be created or partial bowel resection (removal of a portion of the damaged intestine) be performed. A bowel preparation minimizes the risks of a serious complication following a bowel puncture by reducing the amount of bacteria and fecal material present in the intestine. The bowel preparation may be associated with side effects such as nausea, abdominal cramping and occasional vomiting. Please contact the office if the problems become overwhelming. It is not unusual to lose some sleep because of the frequent trips to the bathroom when these preparations are recommended. The procedure is a definite inconvenience but well worth the discomfort compared to a potential surgical complication.

ONLY	the checked procedures outlined below show	ild be followed prior to your surgery:		
囡	Nothing by mouth for 8 hours prior to surgery (not even a sip of coffee, water or gum).			
	Please clean your belly button with a Q-tip and rubbing alcohol daily for 1-3 days prior to your surgery (for laparoscopy)			
	Clear Liquids on evening prior to surgery			
	Magnesium Citrate (Obtain at a drug store, start day prior to surgery) Day:			
	Drink 1/2 bottle at 6:00 p.m.	We suggest that this be consumed	ed very cold with ice chips.	
	Two Fleets Enema & K-Y Jelly (may be purchased at the drug store)			
	♦ 11:00 p.m. evening prior to surgery		Day:	
	♦ In the AM on day of surgery if stool contents not relatively clear. • Day:			

Updated 12/22/2004

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