



PINNACLE GI INSTITUTE

Elevated Expertise, Accessible Excellence

Mukthinuthalapati, V V Pavan Kedar MD (aka Dr. Kedar / Dr. M)

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Endoscopic Ultrasound (EUS) — Preparation Instructions

Please read these instructions today, and again 2 weeks before your procedure.

Note: This is a general reference sheet. Your exact procedure date, arrival time, and location will be confirmed by our office by phone before your visit.

CANCELLATION POLICY: Scheduling procedures requires careful planning between our staff, physicians, and the facility. If you must reschedule or cancel, please call us at least 3 days prior to your procedure at (831) 260-3591. Late cancellations and no-shows may be charged a \$500 fee.

What Is an Endoscopic Ultrasound?

An endoscopic ultrasound (EUS) combines a regular endoscopy with ultrasound imaging to obtain detailed images of your gastrointestinal system — including the esophagus, stomach, duodenum, pancreas, and hepatobiliary system. A small, flexible tube with a camera and ultrasound probe is passed through the mouth, down the esophagus, and into the stomach and small intestine. If any abnormalities are seen, your physician may take a tissue sample (biopsy) for analysis. You'll receive sedation to keep you comfortable and asleep during the procedure.

Transportation — Required

You must be accompanied by an adult (18 years or older) to and from your procedure. You cannot drive after your procedure — sedation will impair your judgment and coordination for approximately 12 hours. Your driver's name and phone number will be required at check-in.

A taxi, rideshare (Uber/Lyft), shuttle, or bus is **not** a valid form of transportation after your procedure. If you do not have a driver, your procedure will be cancelled. If you don't have anyone available, let us know — we can provide information on escort services (at an additional cost).

Cardiac Device or Cardiac History

If you have a cardiac defibrillator (AICD), a permanent pacemaker (PPM), or any current or recent cardiac problems (heart attack, chest pain, difficulty breathing, or fainting episodes), we need a clearance letter from your cardiologist at least 1 week before your procedure.

- Permanent Pacemaker (PPM): we need an interrogation report within 12 months
- Cardiac Defibrillator (AICD): we need an interrogation report within 6 months

Blood Thinners & Anti-Platelet Medications

If you take a blood thinner, ask the prescribing doctor whether you should stop it before your procedure. If your doctor wants you to continue it, please call our office.

Do not stop aspirin unless your doctor tells you to.

Commonly prescribed medications include: Warfarin (Coumadin), Clopidogrel (Plavix), Dalteparin (Fragmin), Tinzaparin (Innohep), Enoxaparin (Lovenox), Cilostazol (Pletal), Dabigatran (Pradaxa), Apixaban (Eliquis), Rivaroxaban (Xarelto), Prasugrel (Effient), Ticagrelor (Brilinta), Edoxaban (Savaysa), and Heparin.

Diabetes or Weight-Loss Medications

If you take:	Do this:
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Insulin or oral hypoglycemic pills	Check with your prescribing doctor as soon as possible for instructions on managing this medication before your procedure.
SGLT2 inhibitors — Ertugliflozin (Steglatro), Canagliflozin (Invokana), Empagliflozin (Jardiance), or Dapagliflozin (Farxiga)	Stop 3 days before your procedure.
Daily GLP-1 agonist — Liraglutide (Victoza, Saxenda), Exenatide (Byetta), or Semaglutide tablet (Rybelsus)	Stop the day of your procedure. Clear liquid diet the day before.
Weekly GLP-1 agonist — Dulaglutide (Trulicity), Exenatide (Bydureon), Semaglutide injection (Ozempic, Wegovy), or Tirzepatide (Mounjaro, Zepbound)	Stop 1 week before your procedure. Clear liquid diet the day before.

Blood Pressure Medication

Take blood pressure medication as usual on the day of your procedure with a small sip of water — **except** diuretics (water pills), which should not be taken the morning of your procedure.

Eating Before Your EUS

One day before your exam: You may eat a regular breakfast, lunch, and dinner, unless instructed otherwise for your specific procedure.

Day of your exam: Do not eat anything. You may have clear liquids until 2 hours before your appointment, and take your regular medications with a small sip of water unless told otherwise.

Two hours before your exam: Do not eat or drink anything — including water, mints, or candy. If you do, your procedure will need to be cancelled.

Acceptable Clear Liquids

- Water, black coffee or tea, clear broth/bouillon, sports drinks
- Ginger ale and other clear sodas, clear juices (apple, white grape), plain Jell-O, frozen juice popsicles

Liquids must not be red or purple. Do not consume alcohol, juice with pulp, milk, cream, or any liquid you can't see through.

What to Expect — Day of Your Procedure

When you arrive, you'll register and sign consent forms (online check-in may also be available). Staff will confirm your name and date of birth, insurance, and the contact information of the person picking you up.

After changing into a gown, a nurse will place an IV, and an anesthesiologist will review your medical history. Your doctor will explain the procedure, answer questions, and go over risks and benefits before you're brought into the procedure room, where your heart rate, breathing, and blood pressure will be monitored throughout.

If a biopsy is needed based on the ultrasound images, your doctor will collect a tissue sample during the same procedure for analysis.

After Your Procedure — Recovery

You'll wake up in the recovery room. Bloating or mild cramping is normal and improves as you pass gas. Once you're fully awake, your IV will be removed, your doctor will discuss results, and your nurse will review discharge instructions before



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your escort takes you home.

If a biopsy was taken, results are typically available in 7–10 days. Avoid alcohol for 24 hours after your procedure, and avoid carbonated beverages, raw fruits, and salads at your first post-procedure meal. Most patients can resume their normal diet and activities the next day.

Call Our Office Immediately If You Have:

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

Questions?

- Procedure or prep questions: call (831) 260-3591, Monday–Friday (not holidays), 8:00 a.m.–5:00 p.m.
- After hours, weekends, or holidays: the on-call provider will reach out. If not urgent, you'll be answered the next business day.
- To reschedule for any reason, call (831) 260-3591.
- For a medical emergency, call 911 or go to the nearest emergency room.