

## Pre-Procedure Discharge Instructions

Does the primary learner have	e any barriers to learning?	□ NO □ YES	
If yes, describe:			
What is the primary language	of the primary learner?		
Is an interpreter required?	NO 🗆 YES		
Any spiritual or cultural concer	rns?		
How do you learn best?			
□ Demonstration	□ Reading	□ Listening	□ All of these
ACTIVITY:			
<ul> <li>DO NOT DRIVE OR OF FOLLOWING THE PROCE</li> </ul>		ACHINERY OR APPLIANCES	S UNTIL THE NEXT CALENDAR DAY
<ul> <li>Do not go back to work o</li> </ul>	r school today.		
<ul> <li>Do not drink alcohol for 2</li> </ul>	4 hours following the proc	edure.	
<ul> <li>Refrain from making critic</li> </ul>	cal decisions until the next	calendar day following the pr	ocedure.
<ul> <li>Have a responsible adult</li> </ul>	drive you home.		
WHAT TO WATCH OUT	FOR:		
Any rectal bleeding, unusual a lf you experience any of these			istent dizziness, or any other problems.
PATIENT SIGNATURE:		D	ATE:
DRIVER'S SIGNATURE:		D	ATE:



43944 15th Street West, Ste 201 Lancaster, CA 93534 Ph: 661.529.7550 Fax: 661.529.7560