

ZUROLOGY

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Date: _____

Patient Name: _____ Date of In-Office Procedure: _____

INSTRUCTIONS FOR IN-OFFICE PROCEDURES

Prostate Biopsy Exam Microwave Procedure

1. Take one (1) Fleet Enema and (1) prescribed antibiotic the evening prior to scheduled appointment.
2. Take one (1) Fleet Enema the morning of the scheduled appointment.
3. Bring all your filled prescriptions with you the day of your procedure.
4. Continue to take the prescribed antibiotic after your procedure until you have completed your full prescription.
5. A light diet ONLY once you have taken the enema. You may go back to a regular diet after your procedure.
6. If you have having a MICROWAVE procedure done, please make sure you have someone to drive you home after your procedure.
7. For any questions please call the office at 954-714-8200.

Urodynamics

8. Take one (1) Fleet Enema a few hours before your scheduled appointment and take your prescribed antibiotic after your procedure until you have completed your full prescription.