



Patient's Name: _____

DOB: _____

**INSTRUCTIONS FOR DIAGNOSTIC IMAGING
PATIENTS WHO HAVE UNDERGONE A COMPUTED
TOMOGRAPHY EXAM**

**Diagnostic Imaging Department
222 Medical Circle
Morehead, KY 40351
Office: 606-783-6761
Fax: 606-783-6935**

Patients:
These are the instructions for your
scheduled procedure in our
Diagnostic Imaging Department.

You have been given a contrast (IV dye) for your diagnostic imaging procedure.

- Drink plenty of water for the remainder of the day in order to flush the contrast from your system.
- Keep follow-up appointments.
- If you experience any complications concerning your implanted device, please contact your referring physician.
- It is recommended by the drug manufacturer that you discontinue your Metformin or Metformin combinations (which include, but not limited to Glucophage, Glucovance, Metaglip, and Avandamet) medication for 48 hours after the diagnostic imaging exam.**

Contact your physician for another medication for blood glucose coverage. Your physician will instruct you when to restart your glucose control medication.

Patient's Name: _____

Date/Time Contrast Given: _____ / _____

Current Diabetic Medication: _____

I acknowledge I have been informed of and understand all of the instructions given to me about my glucose medication. I do not have any more questions at this time. I understand I should call my physician or the Diagnostic Imaging Department at (606) 783-6761 if I have any further questions or problems.

Patient's signature

Date

Witness

Date