



Drug-Induced Sleep Endoscopy (DISE) Pre-op and Post-op Instructions

You are scheduled for Drug-Induced Sleep Endoscopy (DISE) with Dr. _____. The procedure date is _____.

The procedure will be at ENT Centers of Excellence – 1851 N. McKenzie St. Suite 106 Foley AL 36535.

Please arrive 10-15 minutes before your scheduled procedure time. Please review the below instructions carefully.

Pre-op instructions:

Do not eat or drink anything the day of your procedure if your procedure is before noon. Do not eat or drink anything 6 hours before your scheduled arrival time. You may take all of your regular daily medications on the day of procedure with a sip of water. You must have a driver to take you home. Taxi or rideshare or Uber/Lyft etc. or public transportation are not permitted by law – your driver must be someone you know, and the driver must on the premises your procedure.

Description of the procedure:

Once you arrive at the office, an IV line will be placed. Once your procedure begins, you will be given a sedative medication in your IV that makes you go to sleep. Your surgeon will then examine the upper airway using an endoscope – this only takes a few minutes. Once the examination is complete, you will be taken to a recovery room, and your IV will be taken out. Once you are fully recovered, you will be released with your driver to take you home. There is not expected to be any bleeding or pain from the procedure.

Post-op instructions:

Once you arrive at home, please remember that you are still under the effects of anesthesia. Do not do drive, operate machinery, exercise, perform strenuous activity such as yard work, or make any important decisions for 24 hours! The day after your procedure, you may return to your normal activities. Please make sure you have a follow-up appointment scheduled to discuss the results of your endoscopy and the next steps for treatment. Please call the office with any questions or concerns.

I, _____, understand and accept the instructions for my in-office procedure.

Signed _____ Date _____