

Department of Radiology

INFORMATION FOR PATIENTS SCHEDULED FOR EXCRETORY UROGRAM (I.V.P.)

Appointment Date: _____

Appointment Time: _____

IF YOU ARE UNABLE TO KEEP YOUR APPOINTMENT, PLEASE CALL
_____ TO NOTIFY THE DEPARTMENT OF RADIOLOGY.

(Phone No.)

BEFORE YOUR EXAM:

- ◆ Have a clear liquid dinner on the evening prior to your exam. Clear liquids may be continued until midnight.
- ◆ Have nothing by mouth **AFTER** midnight except one small glass of water **TWO HOURS** prior to your exam. No coffee, tea, or solid food after midnight, please.
- ◆ Necessary medications may be taken.

IF YOU HAVE ANY QUESTIONS CONCERNING THE EXAMINATION OR
THE EXAMINATION PREPARATION, PLEASE CALL _____.

(Phone No.)