

## **Medications That May Increase Bleeding Risk**

Certain medications can increase bleeding during surgery. Continued use of these medications may require your procedure to be rescheduled or canceled for your safety.

Unless otherwise directed by your provider:

Discontinue these medications at least seven (7) days prior to your procedure.

You may resume them two (2) days after your procedure, unless instructed otherwise by your provider.

If you are unsure whether a medication falls into one of these categories, please contact your provider at least seven (7) days before your scheduled procedure.

## **NSAIDs (Non-Steroidal Anti-Inflammatory Drugs)**

The following is a list of commonly used NSAIDs. New medications are released frequently, so this list may not be all-inclusive:

Advil, Aleve, Anacin, Anaprox, Ansaid, Choline & Magnesium Salicylate, Davoren, Diclofenac, Disalcid, Ecotrin, Etodolac, Excedrin, Feldene, Fenoprofen, Flurbiprofen, Ibuprofen, Indocin, Indomethacin, Ketoprofen, Ketorolac, Lodine, Meclofenamate, Mobic, Motrin, Nabumetone, Naprosyn, Naproxen, Orudis, Oxaprozin, Piroxicam, Relafen, Salicylates (all medications containing salicylate), Sulindac, Suprofen, Tolmetin, Toradol, Voltaren.

## **Blood Thinners (Anticoagulants / Antiplatelet Medications)**

If you are taking blood thinners, you must discuss this with your provider prior to surgery. These include, but are not limited to:

Coumadin (warfarin)

Plavix (clopidogrel)

Pletal (cilostazol)

Ticlid (ticlopidine)

Trental (pentoxifylline)

Lovenox (enoxaparin)

Aspirin

Do not stop prescription blood thinners without specific instructions from your prescribing provider.

## **Diet Medications / Diabetes Treatments**

If you are taking:

Phentermine

Ozempic, Mounjaro, Any medication containing semaglutide You must withhold these medications 14 days prior to your surgery, as well as Aspirin, unless otherwise directed by your provider.