

Patient Information

Diabetic Medication containing Metformin

Your doctor has referred you for a radiologic study involving the use of intravascular iodinated contrast materials (x-ray dye). If you are currently taking any medication containing **METFORMIN** and have any of the following

	<u>YES</u>	<u>NO</u>
renal insufficiency		
liver disease		
Alcohol abuse		
lactic acidosis		
heart failure		
myocardial ischemia		
sepsis		
severe infection		

A. _____ If yes, discontinue the med for 48 hrs hours after the procedure. It is recommended that you contact your physician after this examination, before your next dose of this medication is due. Your doctor will instruct you as to the specific instructions that you should follow. It is recommended that your physician check your kidney function prior to restarting your medication.

B. _____ if you answer no to all questions, continue taking the medication as prescribed.

If you or your physician has any questions, please feel free to call the CT Section of the Department of Radiology at 215-481-6747.

I acknowledge that I have read and understood the above instructions

Signature

Date