

# ANAL MANOMETRY INSTRUCTIONS

## Test Date and Time: \_

OFFICE	ADDRESS	PHONE #
ORANGE CITY	2884 Wellness Avenue, Suite 100   Orange City, FL	386-668-2221
LAKE MARY	835 Currency Circle, Suite 1001   Lake Mary, FL	407-749-6656
DELAND	929 N Spring Garden Ave. Suite 150   DeLand, FL	386-339-2692

### Follow-up date and Time: \_\_\_\_\_

OFFICE	ADDRESS	PHONE #
ORANGE CITY	2884 Wellness Avenue, Suite 100   Orange City, FL	386-668-2221
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## WHAT IS ANORECTAL MANOMETRY?

Anorectal Manometry is a test performed to evaluate patients with constipation or fecal incontinence. This test measures the pressures of the anal sphincter muscles, the sensation in the rectum, and the neural reflexes that are needed for normal bowel movements.

## **PREPARATION FOR THE PROCEDURE**

- Give yourself **one** Fleet enema two to three hours prior to your scheduled time. The Fleet enema can be purchased from a pharmacy or supermarket over the counter.
- You may take regular medications with small sips of water at least 3 hours prior to study.
- You should not eat anything during the three hours prior to the procedure. If you are a diabetic, this may involve adjusting your diabetic medications.

#### **CANCELLATION FEES**

I understand that missed or cancelled appointments are subject to the following fees:					
Surgical Center or Hospital Procedure with less than 72 hours' notice	\$75				
In-office Procedure with less than 24 hours' notice	\$50				
Office visit with less than 24 hours' notice	\$25				

In addition, I understand that missed appointments or appointments cancelled without required notice may result in a fee charged by the applicable Surgical Center, Hospital, or other facility. I understand that there is a charge for returned checks for any reason (check with your office's staff for specific fees charged). Failure to remedy the returned check may result in legal action. Additionally, there may be a fee charged for completing forms (check with your office's staff for specific fee charged) and copying medical records in accordance with state laws.

Name	DOB	Signature	Date
	Please call our office if you h	ave any questions or concerns	
	2884 Wellness Ave, Suite 100	929 N Spring Garden Ave, Suite 150	835 Currency Circle, Suite 1001
	Orange City, FL 32763 (386) 668-2221	DeLand, FL 327 (386) 339-2692	Lake Mary, FL 32746 (407) 749-6656