

Patient information/Questionnaire

Important information about Dormicum (Midazolam)



MEDIZINISCH
RADIOLOGISCHES
INSTITUT

Dear patient

Dormicum (Midazolam) is an anxiety-reducing, relaxing and sleep-inducing drug. Its effect wears off very quickly. It has no pain-relieving effect. The half-life of the drug in your body is approximately 30 minutes. Short-term amnesia (memory loss) may occur when taking Dormicum.

In very rare cases, Dormicum (Midazolam) can lead to breathing difficulties and a drop in blood pressure. You will therefore be monitored throughout the entire examination. In the case of unexpected side effects, the effect of Dormicum (Midazolam) can be directly reversed by administering an antidote.

We are obliged to inform you that after the administration of Dormicum (Midazolam), your consciousness, ability to concentrate and your ability to drive is impaired.

You are therefore not permitted to be an active road user, drive a motor vehicle, sign important documents or operate machinery for 12 hours following the examination. This applies to all dosage forms of Dormicum (Midazolam).

We recommend that you return home accompanied by a chaperone.

Surname:	<input type="text"/>
Forename:	<input type="text"/>
Date of birth:	<input type="text"/>
Weight:	<input type="text"/> kg

Please answer the following questions

	Yes	No
Do you suffer from sleep apnoea syndrome (breathing problems during sleep)?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have breathing problems?	<input type="checkbox"/>	<input type="checkbox"/>
Have you already taken a sedative today?	<input type="checkbox"/>	<input type="checkbox"/>
If so, what drug?		

Dormicum i.v.*:	<input type="text"/> mg	Dormicum Nasenspray*:	<input type="text"/> Hübe/Seite
Datum*:	<input type="text"/>	Uhrzeit*:	<input type="text"/>

*to be completed by a health professional

Should you have further questions, please ensure that these are answered by the examining doctor. They will be happy to help you.

I confirm that I have been informed of the effect and risks of Dormicum (Midazolam) and shall act accordingly.

Date:	<input type="text"/>	Patient signature:	<input type="text"/>	Doctor:	<input type="text"/>
-------	----------------------	--------------------	----------------------	---------	----------------------

