

Upper Endoscopy Prep

PATIENT NAME	PHYSICIAN NAME
PROCEDURE DATE @ ARRIVAL TIME	PROCEDURE TIME
Procedure Location Hayes Green Beach Hospital 321 E. Harris St, Charlotte Lansing Surgery Center 1707 Lake Lansing Rd, Lansing McLaren Hospital 3520 Forest Rd, Lansing MI Sparrow Hospital 1215 E. Michigan Ave, Lansing	Sparrow Health Center 2909 E Grand River, Lansing Sparrow St. Lawrence 1210 West Saginaw St., Lansing Eaton Rapids Specialty Clinic 1500 S. Main St, Eaton Rapids
Honor Endoscopy Overvious	
inspect for disease. The principle risk of EGD is the remote po	ed, or Propofol. If you are allergic to any of these, latex or eggs,
Labs Please have any ordered bloodwork drawn days before A lab requisition for your bloodwork will be provided, if necessary	
Females of menstruating years will be required to provide a u	rine specimen when you arrive at the facility.
 Cancellation Policy No fee will be assessed if the procedure is rescheduled wit Procedures rescheduled beyond 3 days of the original date Cancellations that occur after 3 days will be charged a \$10 Reschedule and cancellation fees must be paid prior to res 	e will be charged a \$50 fee. 00 fee.
Billing Procedure There may be up to four charges associated with your procedu	re for Physician, Hospital/Facility, Anesthesia, and Lab.

QUESTIONS? Contact

(517) 332-1200 ext:_

Board-Certified Colorectal Surgeons

Please verify with your insurance carrier your benefit coverage for each.

Daniel C. Coffey, M.D. Lucas Julien, M.D. Razvan Opreanu, M.D.

Learn more about our team at MichiganGastro.com

Board-Certified Gastroenterologists

Iftiker Ahmad, M.D.
Oussama Al Sawas, M.D.
Radoslav Coleski, M.D.
Dorian Jones, M.D.
Jannel Lee-Allen, MD
Scott Plaehn, D.O.

Robert Rose, D.O. Albert Ross, M.D. Dana Stewart, D.O. John Walling Jr., D.O. Siaka Yusuf, M.D.

Upper Endoscopy Prep Instructions DH



Medication

Stop all diet medications one week before your procedure. Please notify the scheduler if you are taking the following:

Blood thinners

Aggrenox

Coumadin

Effient

Fragmin

Heparin

Lovenox

Persantine

Plavix

Pradaxa

Ticlid

Trental

Day of Procedure Instructions

- NO SOLID FOODS after midnight prior to the procedure. You may only have clear liquids the day of your test. No
 Ensure this day. Nothing by mouth 6 hours prior to your procedure. No water, gum, mints, hard candy, Ensure, chewing
 tobacco etc.
- Please only take your heart, blood pressure, seizure, respiratory, anti-rejection or anti-anxiety medications at 6 am with a small sip of water. You may use your inhaler(s).
- Diabetics: Please check your blood sugar and take this information with you to the facility. Do not take your insulin or diabetic pills this morning. Bring all of your insulin with you to the procedure.
- You must have an adult 18 years or older remain with you during the procedure and drive you home afterward. Your procedure will be canceled if you fail to meet these requirements.
- Bring your picture ID and insurance cards with you to the facility the day of the procedure. Failure to do so will result
 in cancellation of your procedure.

Results & Follow-up

- Please go home and rest for the remainder of the day. Do not drive or work or operate machinery.
- Your physician will discuss test results with you and your family member following the procedure.
- You will be given written instructions for diet, activity, and follow up instructions.
- If biopsies were taken, a results letter will be sent through our patient portal. If not a member of Follow My Health and the letter will be mailed to you within 14 days of your procedure.