

2080 Clinton Avenue South  
Rochester, N.Y. 14618  
Phone: (585) 271-2800

## Upper Endoscopy Preparation Instructions

Please read instructions at least 1 week before your scheduled procedure.

You are scheduled for an Upper Endoscopy with \_\_\_\_\_

Date: \_\_\_\_\_ Arrival Time: \_\_\_\_\_

GGR 2080 Clinton Ave. South Rochester, NY 14618	Highland Hospital 1000 South Avenue Rochester, NY 14620	FF Thompson Hospital 350 Parrish Street Canandaigua, NY 14424	UMMC 127 North St. Batavia, NY 14020	Westfall Surgery Center 1065 Senator Keating Blvd. Rochester, NY 14618
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### **1 Week Prior**

- You may be asked to stop Coumadin, Plavix, or other blood thinning agents for a number of days prior to your procedure. Please check with our office regarding holding this medication.
- Continue all other medications unless otherwise instructed.

### **5 Days Prior**

- Stop use of fish oil.

### **1 Day Prior**

*AM (before noon) procedure:*

- Do not eat or drink after midnight (a light dinner is recommended).

*PM (afternoon) procedure:*

- Do not eat solid food after midnight (a light dinner is recommended).
- Do not consume any liquid 6 hours prior to your scheduled procedure (nothing by mouth).

Any of the following liquids are OK:

Water, sports drinks, carbonated drinks

Strained fruit juices without pulp (apple, orange, white grape, white cranberry), lemonade or limeade, fruit flavored drinks

Black coffee or tea

Chicken and beef broth or bouillon

Jell-O, popsicles, honey, hard candy

Things to avoid:

Avoid red or purple liquids

Avoid alcohol

See Reverse

Additional Information:

Required Adult Driver:

- **A responsible adult must accompany you, stay with you during your procedure, and drive you home.**
- Plan to be at our facility for 1.5-2 hours.
- Responsible adult supervision is recommended for 12-24 hours after discharge from our facility.
- You are unable to return to work for the duration of the day.

- You are unable to drive for the remainder of the day.

For Diabetic Patients:

- If you take oral medication to control your diabetes and have a morning procedure (before noon), HOLD oral medication the night before the procedure and the morning of the procedure.
- If you take oral medication to control your diabetes and have an afternoon procedure, HOLD oral medication the day of the procedure ONLY.
- If you require insulin to control your diabetes, take half of your usual dose the evening prior to the procedure.

Insurance:

There may be a co-pay at the time of your procedure visit depending on your insurance provider. For patients with deductible plans, we require a payment of \$400 upfront.

Possible Delays:

Although your physician tries their best to stay on time, sometimes issues do arise results in a delay of your start time. We do realize that your time is very important. We will try our best to prevent those instances from occurring.

Cancellations:

If you need to cancel your procedure, please call at least 48 hours prior to your scheduled procedure time. Failure to call 48 hours prior to your scheduled procedure will result in a \$200 cancellation fee.

If you have any questions after reviewing these instructions, please call our office at (585) 271-2800.