



Procedure Reminders

Upper Endoscopy (EGD)

Your Appointment

Appointment Date: _____ **Arrival Time:** _____

Your arrival time is 45 minutes prior to your procedure time. This allows time for check-in, health history review, and pre-procedure evaluation. Please be aware that we may contact you in the days leading up to your procedure, as your arrival time may be subject to change.

Reminders About Your Appointment

Please follow all instructions carefully, as improper preparation may result in your procedure being rescheduled.

- **Transportation:** Due to the sedation you will receive, someone at least 18 years of age MUST bring you to your appointment, remain in their vehicle during the entire time of your procedure, and drive you home afterwards. A taxi, bus, Uber, Lyft, or similar service is NOT an acceptable form of transportation. If you arrive without a driver, your procedure will be rescheduled. If you have questions about whether a method of transportation is acceptable, please contact our office at the number listed below.
- **Alcohol Consumption:** Do not consume any alcohol during the course of your procedure preparation.
- **Jewelry:** Please leave all jewelry and other valuables at home or with your driver, as we do not provide a secure area for these items.
- **Questions?** Contact our office at **(336) 448-2427 (option 6, then option 2)** if you have any questions about your prep or if there are any changes in your medical history between the day of scheduling and the appointment date.

Reminders About Medications

If you are taking medication on a regular basis:

- Take all necessary medications at least 4 hours prior to your arrival time.
- **Diabetes:** Please contact the prescribing physician regarding instructions for injectable diabetic medication the day before and the day of the procedure. **DO NOT TAKE oral** diabetic medication the day of the procedure.
- **Blood Pressure:** DO NOT SKIP any doses of your blood pressure medication.
- **Inhalers and Nebulizers:** May be used up to the time of your procedure.
- **Blood Thinners:** Using the checkboxes below, your provider will indicate whether your blood thinner schedule should be adjusted. If you are on blood thinning medication and no box is checked, please ask your provider. If you do not take a blood thinning medication, you may disregard.

Take blood thinner as usual

Stop taking blood thinner prior to procedure (see specific instructions below):

If it was recommended that you stop taking your blood thinner, please contact the physician who prescribes this medication for you to make sure it is okay to stop taking it for the recommended time (listed below) prior to your procedure. You may remain on aspirin unless otherwise instructed.

Aggrenox/Plavix: 5-7 days

Brilinta/Coumadin/Jantoven: 5 days

Effient: 7 days

Eliquis: 48 hours

Pletal/Persantine: 48 hours

Pradaxa: 48 hours

Savaysa: 1-3 days

Xarelto: 24-48 hours

If you are on a blood thinner that is not listed, please contact the prescribing physician for instructions.



Upper Endoscopy Patient Preparation Instructions

Instructions for your appointment:

- ✓ **The night before your procedure:** You may have NO SOLID FOODS after midnight.
You may consume a clear liquid diet. Clear liquids may include water, soft drinks, coffee or tea without cream, popsicles, broth/bouillon, Jell-O, non-pulpy juice, etc. DO NOT consume anything red in color OR dairy products.
- ✓ **4 hours prior to arrival time:**
ABSOLUTELY NOTHING ELSE BY MOUTH AFTER THIS TIME! (This includes water.)