Digestive Healthcare of Georgia, P.C.

John E Burney, III, M.D. Bryan Woods, M.D. Kiran J. Kanji, M.D. David M. Gryboski, M.D. Niraj Khandelwal, M.D., M.H.S. Clara Antoury, M.D. Aniruddh Patel, M.D. William E. Norris, M.D. David Rudolph, D.O Fayetteville: 678-817-6550 or 770-719-3240 Newnan: 678-326-4812

You are scheduled for an **upper endoscopy** on ______ at _____.

Please report to Summit Endoscopy Center Suite 401- Inside Piedmont Fayette Hospital-East Entrance (4th floor) at _____.

Please report to Piedmont Fayette Hospital registration desk - West Entrance at _____

You MUST have a driver who remains on the hospital campus while your procedure is being performed.

No-show on the day of or procedures cancelled less than **3 business days** of the appointment may be subject to a charge of **\$250.00**. These charges will be billed to the patient and not their insurance carrier.

If you have any questions or need to cancel your procedure call: Summit Endoscopy Center: 678-817-6505 Option 1, 2, 3 or 4 www.secfay.com We use text messaging to send appointment reminders. To opt out of these reminders reply with STOP.

Piedmont Fayette Hospital:

Dr. Gryboski: 678-817-6550 x 1422 Ann M. Dr. Kanji: 678-817-6550 x 1420 Jannah Dr. Khandelwal: 770-719-0922 Lisa M. Dr. Rudolph: 678-326-4812 x 1310 Courtney Dr. Norris: 678-326-4812 x 1308 Crystal Dr. Antoury: 770-719-3240 x 1448 Lisa H. Dr. Burney: 770-719-3240 x 1402 Katie B. Dr. Woods: 770-719-3240 x 1448 Lisa H. Dr. Patel: 678-326-4812 x 1311 Angela

In order to pre-cert the procedure we must have your current insurance card. Our staff will contact the insurance company to pre-certify the procedure. Pre-cert is not a guarantee of payment. For benefit information, contact your insurance company.

Please bring your insurance card, picture ID and a list of medication to the facility on the day of your procedure.

If you have special needs, please notify the staff prior to your procedure.

Important Information for your Upper Endoscopy *Please read carefully*

If you vary from these instructions in any way, your procedure will be delayed or cancelled.

You may have **NOTHING** by mouth after midnight the night before your procedure. This includes gum and candy.

You may have **NO** tobacco products or marijuana the day of your procedure. Please do not consume alcoholic beverages **24** hours before your exam.

Two weeks before a procedure: Stop taking any herbal products.

One week before your procedure: TAKE NO ASPIRIN. Read all "over the counter" labels and take no medications that contains aspirin. Take no Ibuprofen (Advil, Aleve, etc.), no BC or Goody's Powders, no arthritis medications or anti-inflammatory medications. You may take Tylenol. Do not take Vitamin E, Iron, multi vitamins or fish oil. All of these medications have a blood thinning effect and could cause unnecessary bleeding. Your doctor will advise you to stop Plavix, Coumadin, Pradaxa, Xarelto, or Eliquis 1, 2, 3, 4, or 5 days before the procedure. Avoid nuts and seeds.

The morning of the procedure: If you take heart medications, breathing medications, blood pressure medications or seizure medications, you must take it at least 4 hours prior to your procedure with a **sip** of <u>water</u>. If you have any doubt about whether you should take your medications prior to your procedure, simply bring them with you.

If you are diabetic, read and follow the special diabetic instructions.

Wear comfortable clothes that are easy to remove. Jewelry should be left at home with exception of wedding bands. Remove any tongue, lip, nose and cheek piercings prior to the procedure.

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