

INSTRUCTION FOR EGD PREPARATION

A representative from our office will call you to schedule your EGD. If you have not heard from our office within 24 hours, please call us at (404)255-4333 with available dates.

Please let the Procedure Scheduler know as soon as possible if you have to cancel a procedure.
There is a \$250.00 cancellation fee for any cancellations not made 72 hours in advance.

Patient Name: _____

Procedure Date: _____

Location: _____

Arrival Time: _____ Procedure Time: _____

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***STOP TAKING:** Motrin, Ibuprofen and Advil 7-10 days prior to procedure.
Blood Thinners and Aspirin products 3-4 days prior to the procedure as long as you have discussed this with the physician

NOTHING TO EAT OR DRINK AFTER MIDNIGHT THE NIGHT PRIOR TO YOUR PROCEDURE

*****YOU MUST HAVE A DRIVER TO DRIVE YOU HOME** after the procedure due to IV medication. We can only discharge you in the care of a person known to you. We will **NOT** discharge you to a Taxi or other driving service.