



**ANNE ARUNDEL  
GASTROENTEROLOGY  
ASSOCIATES, P.A.**

William A. Cassidy, MD  
James M. Blake, MD  
Anthony J. Calabrese, MD, FACG  
Michael N. Peters, MD, FACG  
John L. Newman, MD, FACG  
Suzanne L. Sankey, MD  
Douglas D. Dykman, MD, FACG  
Christopher F. Schultz, MD  
Charles J. Cattano, MD, FACG  
Melanie L. Jackson, MD  
Praveena G. Velamati, MD  
Amanda M. Era, CRNP

Bestgate Medical Clinic  
820 Bestgate Road, Suite 2A  
Annapolis, Maryland 21401  
410-224-2116  
Fax 410-224-2118

Robinson Crossing  
474 B Ritchie Highway  
Severna Park, Maryland 21146  
410-224-2116  
Fax 410-224-2118

AAMC Health Services-Bowie  
4175 North Hanson Court  
Suite 209  
Bowie, Maryland 20716  
410-224-2116  
Fax 410-224-2118



*An Affiliate of Anne Arundel  
Gastroenterology Associates, P.A.*

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*An Affiliate of Anne Arundel  
Gastroenterology Associates, P.A.*

Bestgate Medical Clinic  
820 Bestgate Road, Suite 2A  
Annapolis, Maryland 21401  
443-837-2036  
Fax 443-837-2037

www.aagastro.com  
Toll Free 1-866-224-AAGA  
Local 410-280-AAGA (2242)

# PREPARATION INSTRUCTIONS FOR CAPSULE ENTEROSCOPY

**Date of Procedure** \_\_\_\_\_

**Arrival Time** \_\_\_\_\_

**Procedure Time** \_\_\_\_\_

**PLACE**  MD Center for Digestive Health  
Bestgate Medical Clinic  
820 Bestgate Road, Suite 2A  
Annapolis, MD 21401

## FIVE (5) DAYS PRIOR TO EXAM

Refrain from taking aspirin products, non-steroidal anti-inflammatory Medications (advil, ibuprofen) and iron products.

## DAY PRIOR TO EXAM

**NOON:** Start a clear liquid diet. Clear liquids allowed are water, Gatorade, apple juice, white grape juice, gingerale, sprite, plain coffee or plain tea.

**5PM:** Take (1) Biscodyl 5mg tablet. This can be purchased at the pharmacy. Biscodyl is a laxative.

## NOTHING TO EAT OR DRINK AFTER MIDNIGHT

When you arrive for the Capsule Enteroscopy exam, you will receive 10 drops of Simethicone (a gas inhibitor) mixed with 4 ounces of water, 30 minutes before swallowing the capsule. We will provide the Simethicone.

## PATIENT RESPONSIBILITY

IT IS YOUR RESPONSIBILITY TO CHECK WITH YOUR INSURANCE COMPANY REGARDING PRE-AUTHORIZATION AND ANY REFERRALS NECESSARY FOR THIS PROCEDURE. YOU WILL NEED TO PRESENT A CURRENT PHOTO ID, VALID INSURANCE CARD AND VALID REFERRAL, IF REQUIRED. YOU WILL BE EXPECTED TO PAY ANY COPAYMENTS, COINSURANCE, DEDUCTIBLES AND OUTSTANDING BALANCES AT THE TIME OF YOUR APPOINTMENT. IF YOU ARE NOT PREPARED TO PAY THE FEES DUE, YOUR APPOINTMENT MAY BE CANCELLED. PLEASE LEAVE VALUABLES AT HOME OR WITH THE RESPONSIBLE TRANSPORTATION PROVIDER. PLEASE BRING YOUR EYEGLASSES, IF APPLICABLE, AS WELL AS SUFFICIENT CASH, CREDIT CARD OR CHECK FOR YOUR FINANCIAL RESPONSIBILITY.

*Anne Arundel Gastroenterology Associates provides medical services regardless of race, color, age, national origin, sex, religion, or handicap. If you are hearing impaired or have a language barrier, please notify our office.*