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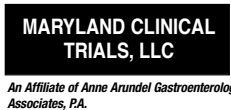
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# PREPARATION INSTRUCTIONS FOR UPPER ENDOSCOPY OR ERCP

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

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

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

**PLACE**  MD Center for Digestive Health  
Bestgate Medical Clinic  
820 Bestgate Road, Suite 1A  
Annapolis, MD 21401

AAMC (Anne Arundel Medical Center)

## INSTRUCTIONS

### GENERAL INSTRUCTIONS:

- Please notify the office at least one week prior to procedure if you are taking medications for diabetes or if you are taking blood thinners including Plavix, Coumadin and Warfarin. (Please bring a list of current medications you are now taking.)
- Because medications you will receive will make you drowsy, you will not be a competent driver. You must make arrangements for someone to drive you home. Your transportation provider must wait for you.

### SEVEN DAYS PRIOR:

- Discontinue aspirin products, iron tablets, blood thinners, herbal products, vitamins and dietary supplements one week prior to procedure unless otherwise advised by your physician.
- Discontinue ibuprofen (Advil, Nuprin or Motrin) or other non-steroidal (NSAID) anti-inflammatory medications for seven days prior to procedure. You may take Tylenol if needed. (Celebrex and Bextra are okay.)

### DAY OF PROCEDURE:

- No solid food after midnight. Clear liquids only, up to 4 hours prior to your procedure. Then, nothing to eat or drink.
- Take your usual medications as you normally do on the day of your examination unless directed differently by your physician
- If your exam is at AAMC, you may not drink or eat after midnight

### 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.

IT WILL BE NECESSARY FOR YOUR TRANSPORTATION PROVIDER TO WAIT FOR YOU.

*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.*