**\*Dr. Karki \*Dr Magod \*Dr Schooler \*Dr. Outlaw \*Dr. Brahmbhatt \*Dr Buccini**

**Upper Endoscopy INSTRUCTIONS SHEET**

**1002 N. Church St. Suite 2** **Greensboro, NC 27401**

**GI OFFICE: (336) 378-0713 ENDO CENTER: (336) 268-3880**

**LOCATION**: **Eagle Endoscopy Center – Suite 2 /LOWER LEVEL**

**\*Take a right at the STOP sign. Please park in the back of the building.**

«FirstName» «LastName» «DOB»**DATE: PROCEDURE TIME: ARRIVAL TIME:**

1. **DO NOT** eat solid food after midnight before your procedure. You may only have clear liquids until 4-hours prior to your procedure. (no red or purple products). Only clear broth or bouillon, black coffee or tea, clear juice (apple, white grape), clear soft drinks or sports drinks.
2. If you are taking Eliquis (Apixaban), Xarelto (Rivaroxban), Coumadin® (Warfarin), Plavix (Clopidogrel), Lovenox (Enoxaparin), Pradaxa (Dabigatran), Effient (Prasugrel), Brilinta (Ticagrelor) or any other blood thinning medication, **make sure you have been advised when to stop these medications before your procedure**. If unable to stop your medication(s) or have questions, call our office at (336)378-0713.
3. **( ) 4-hours** prior to your procedure **DO NOT** have anything by mouth except your morning medications.
4. **DO NOT** consume/use alcohol, illicit drugs, vape, or marijuana 24-hours prior to your procedure. Your procedure will be canceled.
5. An adult must drive you home following your procedure. Please provide your driver’s name and cell phone number.

We will call/text them to pick you up when ready for discharge. They will be asked to leave for the duration of your procedure. You may **NOT** use a Taxi, Uber or Lyft due to the sedation medications used during your procedure.

1. Your procedure will last approximately two hours from check-in to discharge. You may confirm your release time with the facility when you arrive.
2. You may not drive or make any important/legal decisions for 24-hours following your procedure due to impairments caused by sedating medications.
3. **Leave valuables at home** as we will not be responsible for them.
4. Please note that there may be **$100 cancellation fee** applied to your account for **no shows** or less than 72-hour notification of cancellation.

**Please note: Failure to follow these instructions in their entirety may result in rescheduling/cancelling your procedure. Call our office with any questions or concerns at (336)378-0713 press #2**

\*\*Special Instructions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_