

ENDOSCOPIC SURGICAL CENTRE OF MARYLAND, LLC
10801 Lockwood Drive, Suite 110
Silver Spring, MD 20901
Phone: (301) 593-5110 Fax: (301) 593-6269
TTY Users call Maryland Relay # 711

ENDOSCOPIC SURGICAL CENTRE OF MARYLAND-NORTH, LLC
15005 Shady Grove Road, Suite 300
Rockville, MD 20850
Phone: (301) 762-1280 Fax: (301) 762-5678
TTY Users call Maryland Relay # 711

You are scheduled for an EGD at _____ by Dr. _____

On: _____ **Arrival time:** _____ Procedure time: _____

Due to cancellations or physician emergencies, your procedure time may change. You will be called the day before to confirm all appointment instructions. PLEASE ALLOW ABOUT 2 ½ HOURS TOTAL TIME FOR ALL ASPECTS OF YOUR PROCEDURE.

PLEASE REVIEW THESE INSTRUCTIONS CAREFULLY AT LEAST SEVEN (7) DAYS BEFORE YOUR PROCEDURE.

ABOUT YOUR PROCEDURE

You will be sedated for your procedure. You must be accompanied home by a responsible adult. You may not operate motor vehicles until the following day. *If these arrangements are not made before you come to the facility, your procedure will be cancelled.* **You may not walk, ride a bike or take the bus home. No one will be allowed to leave in a taxi, Uber or Lyft, unless accompanied by a responsible adult (over 18 years old).** *CENTRE closes at 4:30PM. Therefore, if your procedure is in the afternoon, your ride must be at the Centre by 4:30PM.

FOUR (4) DAYS BEFORE YOUR PROCEDURE

Do not take **anti-inflammatories** (e.g., ibuprofen, Advil, Motrin, Aleve, etc.). However, Celebrex may be continued up to the day of the procedure. You can take **Acetaminophen or Tylenol**.

THE DAY BEFORE YOUR PROCEDURE

You are allowed to eat your regular diet. If you are taking any medications (prescription or nonprescription) for any reason, please check with the doctor to determine whether or not to take your medications on the day of procedure. **Please take all heart and blood pressure medications up to and including the day of procedure.**

If you are diabetic and taking Glucophage, hold Glucophage for 24 hours prior to your procedure. Hold all other oral diabetic medications the morning of your procedure.

THE DAY OF YOUR PROCEDURE

DRINK ONLY CLEAR LIQUIDS UP TO FOUR HOURS BEFORE YOUR PROCEDURE. Do not eat any food or drink dairy products such as milk, Ensure, nutritional supplements or protein drinks. Clear liquids include clear juices such as apple, white grape and white cranberry, clear broth or bouillon, tea and coffee (without milk or creamer), Jell-O, Italian ices, sodas, Kool aid, Gatorade and Water.

SPECIAL INSTRUCTIONS

During the 4 hours before your procedure, take nothing by mouth, not even water or chewing gum, except for a small sip of water if needed for your medications. However, you may still brush your teeth prior to the procedure. Please do not wear any perfumes or lotion or cream products to the appointment.

Please take heart, blood pressure, Parkinson's, seizure and asthma medications on the day of procedure. Please bring asthma inhalers with you to your appointment. Stop Metformin/Glucophage 24 hours before your procedure.

Aspirin: _____ Insulin: _____

Diabetic meds: _____ Anticoagulation meds: _____

Any patient needing to cancel or reschedule their procedure must notify the Centre at least **TWO (2) BUSINESS DAYS** prior to their scheduled arrival at the Centre.

A cancellation fee of two hundred dollars (\$200) will be incurred by those patients who fail to keep their appointment or do not cancel their procedure in the allotted time.