

Procedure Date:

Procedure Time:

Arrival Time:

Location:

INSTRUCTIONS FOR EGD

Read Carefully-Follow all instructions to ensure a successful procedure

5 DAYS BEFORE THE EXAMINATION

Discontinue any medication that contains aspirin (i.e. aspirin, Advil, Motrin, Ibuprofen, Alka Seltzer, Aleve, Coumadin, Plavix, pain and arthritis medications, etc.). Tylenol products are not restricted.

IF YOU ARE ON A BLOOD THINNER PLEASE NOTIFY OUR OFFICE.

THE DAY BEFORE THE EXAMINATION

Do not eat or drink after midnight

THE DAY OF THE EXAMINATION

Please arrange for a responsible adult to drive you home.

IF YOU DO NOT HAVE A DRIVER, YOUR PROCEDURE WILL BE CANCELLED AND RESCHEDULED TO A LATER DATE.

* If you are scheduled at <u>McKay Dee Hospital</u>-go to the main entrance on the east side of the building. Go to the 2nd floor, turn left and go to the endoscopy lab at the end of the hallway. **Pre-Registration: 801-387-7690.** <u>YOU MUST CALL</u> <u>AND PRE-REGISTER. IF YOU FAIL TO DO SO, YOUR APPOINTMENT WILL BE</u> <u>RESCHEDULED.</u>

* If you are scheduled at <u>Ogden Regional</u>-go to the main entrance and check in with the information desk where you will be directed where to go.