

PLEASE READ THESE DIRECTIONS AT LEAST SEVERAL DAYS BEFORE YOUR SCHEDULED PROCEDURE

Patient:			

You are scheduled for an Upper Endoscopy at:

- Lowell General Hospital 295 Varnum Ave Lowell, MA
- Northeast Endoscopy Center: 59 Lowes Way Lowell, MA

ON:

At:

You must report to the Endoscopy Unit at:

If you need to cancel or reschedule this procedure, you must do so at least 3 days prior to avoid a \$150 cancellation fee.

A family member or friend must drive you to and from your procedure. You will not be able to drive or work after the procedure.

PLEASE STOP ALL SOLID FOOD AND LIQUIDS 8 HOURS PRIOR TO YOUR PROCEDURE.

Regarding your medication: Follow the <u>directions as indicated below</u> and contact the office (978-454-9811) if you have any questions.

- Avoid Aspirin, Advil, Aleve, Vioxx, Celebrex and similar medications for 7 days prior to procedure. Tylenol
 or other acetaminophen-based products are fine.
- 7 days prior to the procedure STOP Aspirin, Advil, Aleve, Celebrex, Motrin, Ibuprofen, Fish Oil and Iron supplements. Tylenol or other acetaminophen based products are OK.
- Make sure to stop Fish Oil 7 days prior to the procedure.
- Take only ½ the usual dose of your diabetic medications on the morning of the procedure.
- If you smoke, please stop smoking 2 days prior to your procedure.
- Do not use marijuana eight hours prior to the procedure as it could cause complications/adverse effects.
- If you take Coumadin, Warfarin, Plavix, Ticlopidine or other blood thinners stop these medications as follows.

	[Itake your usual blood pressure, hear In take them with a few sips of water a	
before the proced			
		tions you may have. We understand to cedure as positive an experience as po	
Thank you,			
Gastro Health, LLC		4 Meeting House Road, Suite 6-8	Chelmford, 01824
Justio Housell, LLC		- Miceting House Road, Juice 0-0	Cheminora, 01024