

Northwest Gastroenterology Clinic

Upper Endoscopy with Bravo- Preparation Instructions

One Week Before Your Procedure



- Notify our office if you have had any major changes to your health since you scheduled your procedure.



- Arrange for a ride home from a licensed adult. By law, if you receive sedation, you may not drive for the rest of the day after your procedure. You may walk or ride public transportation with an adult escort.



- If you take **blood-thinner or anti-platelet medications**, (ie. Plavix, Coumadin, Pradaxa) or any **diabetic or weight loss medications** (ie. Ozempic, Trulicity) please call our office if you have not received special instructions.
- If you have not been directed by your physician to stop your stomach medications continue to take them as directed.
- Continue to take all other medications, unless instructed by your physician or our nursing staff.



STOP

- Stop taking: Fish oil



If your physician directed you to stop taking stomach medications:

7 days prior to procedure: Stop taking PPI medications

PPIs include: Prilosec (omeprazole), Prevacid (lansoprazole), Nexium (esomeprazole), Aciphex (rabeprazole), Protonix (pantoprazole), and Dexilant (dexlansoprazole).

3 days prior to procedure: Stop taking H2 blockers medications

H2 blockers include: Zantac (ranitidine), Pepcid (famotidine), Axid (nizatidine), and Tagamet (cimetidine).

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Upper Endoscopy Preparation Instructions

1 Day Before Your Procedure

- If you take medications for diabetes, take 1/2 the dose of your diabetic medication(s) the day before your procedure.
- You will not take a dose the day of your procedure.
- No solid food 8 hours before your arrival time (if you have a morning procedure this may mean you will need to stop solid foods this evening).

Day of Your Procedure

- **No solid food 8 hours before your arrival time.**
- Clear liquids only. See our list of recommended clear liquids.
- No RED, ORANGE or PURPLE dyes.
- You may take blood pressure, heart, or seizure medications the morning of your procedure. Be sure you take these at least two hours before your arrival time.
- Hold all other medications.
- **DO NOT HAVE ANYTHING TO EAT OR DRINK TWO HOURS PRIOR TO ARRIVING. NO CHEWING GUM.**
- Wear comfortable clothes, leave your valuables at home, and arrive on time at the designated location with any paperwork completed that we may have asked you to bring.
- Don't forget your photo ID and insurance card.



You must have a licensed adult drive you home after you receive sedation. You may walk or take public transportation if you have an adult escort. If you do not arrange for a ride or escort, we will not be able to perform your procedure. Your ride or escort must meet you in the office, to assist you with walking out of the building.



If you smoke or use chewing tobacco:

Do not smoke 24 hours prior to your procedure.
Do not use chewing tobacco 6 hours prior to your procedure

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How will I know if I am ready for my procedure?

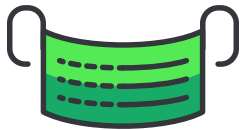
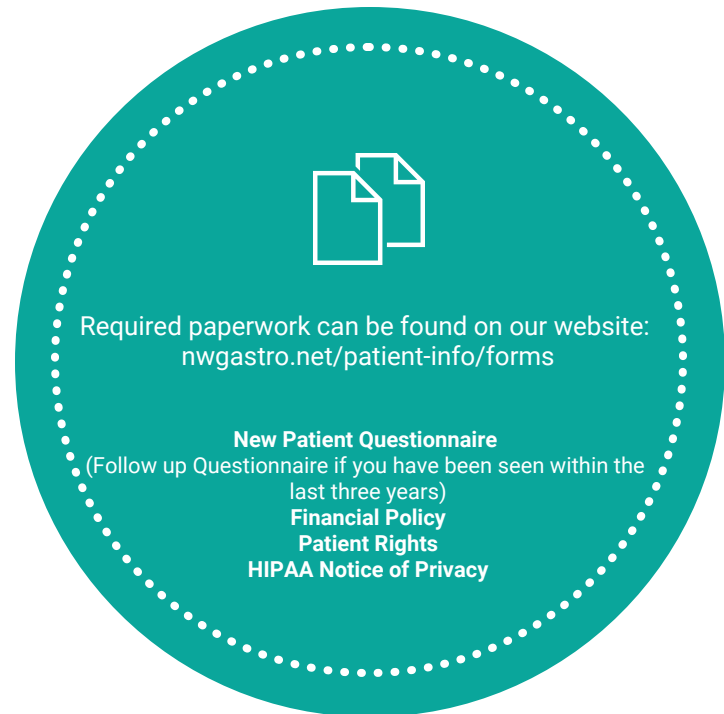
You will be ready for your procedure when:



You have read through and followed all of the instructions.



You have arranged for your ride home, have all of your required paperwork, and have your photo id and insurance card.



COVID-19 Requirements:

- COVID-19 Requirements:
- Face masks are optional. If you would prefer that staff on your care team wear a mask, please let us know when you check in for your appointment.
- If you have tested positive for COVID-19 in the 7 weeks prior to your procedure or are experiencing COVID-like symptoms, please call our office.

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Recommendations: Clear Liquid Diet

What is considered a clear liquid?

TIP: Hold a piece of newspaper or paper with print on it up to the liquid and try to read it, if you can see the words, the liquid is clear.



✓ Okay to have

✗ DO NOT HAVE

Okay to have	DO NOT HAVE
Water and mineral water	Milk or dairy drinks
Clear sports drinks- NO RED, ORANGE, or PURPLE	Coffee with cream
Apple juice	Orange juice
Black coffee-NO MILK OR CREAM	Grapefruit juice
Soda	Tomato juice
Yellow or Green Jello	Any solid foods
Popsicles- NO RED, ORANGE or PURPLE	
Chicken broth	

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What can I expect after my procedure?

After your procedure:



- You will be taken to an area to recover when your exam is completed. You may wake up there and not remember how you got there due to the medications (sedation) you may receive.
- The doctor will come and speak with you. Again, due to the medications, you may not remember the conversation with your doctor. We will provide you with **written discharge instructions** that will include the information the doctor reviews with you, along with photos from your exam and directions for contacting the office with any questions or concerns.
- If you have any polyps removed or biopsies taken, your results will be expected to be reviewed within 7-10 days of your procedure.
- **If you are signed up for MyHealth you may have access to your results before your provider has an opportunity to review them. Our office will contact you if there are any concerns with your results. If your results are normal and you are not on Myhealth, you will receive your results by mail.**

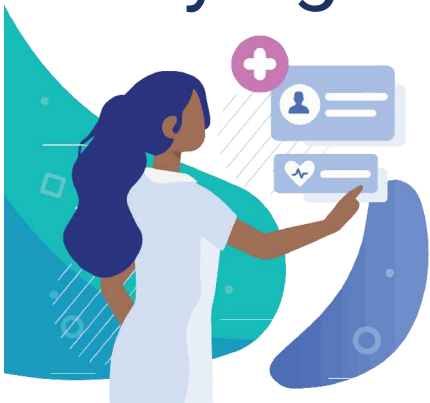
Recovery After Receiving Sedation

For the remainder of the day after your procedure, you will follow these instructions:

- Rest for the remainder of the day. You can resume normal activity the next day.
- Resume a normal diet.
- Continue present medications- unless instructed otherwise by your doctor.
- Avoid driving, and operating any machinery and power tools.
- Avoid alcoholic beverages (including beer)
- Avoid making any important decisions or signing any legal documents
- Avoid any activity requiring alertness, good judgment, or good reflexes

Call our office, 503-229-7137, if you experience any new pain, nausea, bleeding, fever, or if you have any questions after your procedure.

Paying for your procedure



We understand it is important to know how much you will be responsible for paying for your medical care. Because each patient situation is unique, the cost of care is not always the same. The amount you will be responsible for is generally determined by your insurance (if you are using it).

You can use this guide to assist you with determining what kind of procedure you will be having, so that you can inform your insurance company to help you determine your benefits and estimated responsibility.

Colonoscopy Types

Screening Colonoscopy

A test if you are **average-risk** for colon cancer.

- Done every 10 years for anyone age 45* to look for (and remove, if needed) colon polyps.
- Typically, screening colonoscopies are covered 100% by insurance companies.

Surveillance Colonoscopy

A test if you have **no symptoms** but are **higher-risk** for colon cancer such as personal history of polyps.

- Generally done more frequently than every 10 years based on the risk for colon cancer determined by the physician.
- Many commercial health insurance plans consider these diagnostic procedures and they may not be fully covered.

Diagnostic Colonoscopy

A test if you **have symptoms**, a chronic disease (IBD), or an abnormality your doctor wants to investigate.

- Not fully covered (meaning you may have to pay some of the costs).
- Often the doctor will take biopsies of the colon and/or remove polyps to help diagnose the problem.

* The US Preventative Services Task Force recommend screenings beginning at age 45. **Contact your insurance** to find out if your plan follows these guidelines.

Upper Endoscopy (EGD) is a diagnostic procedure, it is not fully covered by insurance, you may have to pay some of the costs.

You may get up to 4 bills for your procedure.



One from the doctor who did your procedure



One from the place where you had your procedure.



One from the anesthesia provider (if you had sedation)



One from the pathology lab, if a biopsy or polyp is removed.

