

**DRS. TAMIMI, COLLIER, BIGORNIA, GLAZIER, MIRCHANDANI**

BOARD CERTIFIED GASTROENTEROLOGISTS

THE ENDOSCOPY CENTER OF OCEAN COUNTY  
477 LAKEHURST ROAD

THE ENDOSCOPY CENTER OF TOMS RIVER  
473 LAKEHURST ROAD

TOMS RIVER, NEW JERSEY 08755

TELEPHONE: 732-349-4422  
FAX: 732-349-8126

**INSTRUCTIONS FOR EGD**

**Test Date:** \_\_\_\_\_

**Arrival Time:** \_\_\_\_\_

*PLEASE BE ADVISED: Your appointment time may be subject to change –due to cancellations, emergencies and the doctor's schedule. Thank you in advance for your cooperation.*

**REPORT TO:**

**Endoscopy Center of Ocean County**  
477 Lakehurst Road  
Toms River, NJ 08755

**Endoscopy Center of Toms River**  
473 Lakehurst Road  
Toms River, NJ 08755

**Community Medical Center**  
Outpatient Dept.  
Toms River, NJ

**Ocean Medical Center**  
Outpatient Dept.  
Brick, NJ

The above time allows you sufficient time to register. There is no need to arrive any earlier than the above stated time. You will be here approximately 2 hours.

Because you will be sedated for your procedure, **you are not permitted to drive until the day following you procedure** . **You will need someone to accompany you and drive you home after the procedure.** Unaccompanied discharge home via public transportation or taxi is discouraged, and only permitted if you have discussed it ahead of time with your physician, who must approve it. Because waiting room space is limited, your driver may leave and return to pick you up. They will be asked to leave a phone number where they can be reached.

**ABSOLUTELY NO SOLID FOOD ON THE DAY OF PROCEDURE**

| <b>AM PROCEDURES</b>  | <b>PM PROCEDURES</b>   |
|---|--|
| If your procedure is scheduled in the morning<br>(8:00 – 12:30 PM)<br><b>You must have nothing by mouth after 12 midnight the night before your test.</b> | If your procedure is scheduled for 1:00 PM or later – <b>you may have <u>clear liquids only</u> BEFORE 7:00 AM – then nothing at all by mouth.</b> |

1. If you take medication for your **heart, blood pressure, lungs or seizures,** you should take them with a **sip of water** in the morning.
2. If you are **diabetic, DO NOT TAKE YOUR DIABETIC MEDICATIONS** on the morning of your procedure. **Please test your blood sugar at home before coming in.**
3. **If you normally take** ASPIRIN, BABY ASPIRIN, ECOTRIN, or products that may thin your blood, e.g. :( **Motrin, Aleve, Advil Herbal Supplements, and Vitamin E**) or **BLOOD THINNERS (COUMADIN, XARELTO, PLAVIX, etc.), make sure that you have advised the physician. You will be given SPECIFIC INDIVIDUAL INSTRUCTIONS REGARDING THESE MEDICATIONS. If you are not sure what to do, please call the office.**
4. Please fill out and bring the **Patient Medication List** form, even if you don't take any medication regularly.
5. If you have dentures, you will need to remove them at the time of your procedure. (we provide a denture cup). Please do not use denture adhesive that day.
6. If you wear contact lenses, please **do not wear them.** In order to prevent loss or damage, we ask that you **remove them at home.**
7. **Female patients of childbearing age:** Be advised, a urine dipstick pregnancy test will be performed on admission. If positive, your procedure will not be done.
8. If you have **sleep apnea** and use a CPAP machine, **please bring it with you.**

**Any changes in your insurance must be submitted at least 1 week prior to your test date.** If you have an **HMO Insurance\***, referral form from your primary physician is needed. If you have **Commercial Insurance\***, please forward a completed claim form to our office. Please check with your insurance company to verify pre-certification is needed. **Please understand that if you cancel your procedure with less than 48 hours' notice, you will be charged a \$100 cancellation fee (not covered by insurance).**

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**INSTRUCTIONS FOR EGD**

**Additional Information About Upper GI Endoscopy**

After careful medical assessment, your doctor has recommended that you have an upper GI endoscopy, (also known as an EGD or Panendoscopy). During this procedure a flexible fiber optic tube (endoscope) is passed through the mouth and throat into the upper digestive tract. This procedure allows the doctor to examine the lining of the esophagus (food tube), stomach, and duodenum (first portion of the small intestine) and to identify any abnormalities.

You will be given an instruction sheet explaining the preparation for this procedure, as it is essential that your stomach be empty for this procedure. Please keep this instruction sheet handy so that you can review it the week before your procedure. You may be asked to stop taking certain medications for several days prior to your procedure.

On arrival, the day of your procedure, you will be asked to undress from the waist up and will be given a patient gown. The nursing staff will admit you by reviewing your medical and surgical history, as well as checking your vital signs ( blood pressure, pulse, temperature, and breathing status).

All dentures and eyeglasses must be removed prior to the start of the procedure. You may prefer to remove contact lenses at this time.

You will be asked to sign a consent form authorizing the doctor to perform the procedure.

.A needle for intravenous (IV) medicines will be placed in your arm prior to the procedure. The anesthesiologist will meet you and review your medical and previous anesthesia history, as well. Medicine will be injected through the IV, by the anesthesiologist, that will make you relax and fall asleep during the procedure. Please let the doctor and the nursing staff know if you are allergic to any medications.

The doctor will then pass the flexible endoscope through your mouth and into your stomach while you sleep. He will examine the lining of the esophagus, stomach, and duodenum. A biopsy specimen (tiny bit of tissue) may be taken for microscopic examination. You will not feel any sensation or discomfort when the biopsy is performed. Any specimens will be sent to a laboratory specified by your insurance.

Most people do not recall any of the procedure because of the effect of the medicine. After the procedure, you will probably feel drowsy and may sleep for a short time. You may experience a slight feeling of bloating from air inserted during the procedure.

As long as there are no contraindications, you will be given a light snack and drink prior to your discharge.

The doctor will then discuss the findings with you and the nursing staff will give you written instructions to follow when you go home. If you have any questions, please feel free to ask the doctor or the nursing staff.