

EGD

Esophagogastroduodenoscopy Upper GI Endoscopy

Don W. Roberts, M.D.

South Georgia Medicine, P.C.

Patient Name : _____

Appointment Date : _____

Arrival Time : _____

OR

Call Us For Your Arrival Time : _____

Facility:

1. Tifton Endoscopy Center, Inc.

Plan to be here from 2 – 4 hours

1111 East 20th Street
Tifton, GA 31794
(229) 382-9338

Entrance is located on the SIDE of South Georgia Medicine, P.C.

2. Tift Regional Medical Center

901 East 18th Street
Tifton, GA 31794
(229) 386-6799
(229) 386-6154

Entrance is located on 20th Street. Report to Outpatient Admissions first.

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- Wear comfortable Clothing
 - No make-up or nail polish
 - Leave valuables at home
 - Bring all of your medications.
 - Bring a list of your allergies.
 - Bring a responsible person with you to drive you home and stay with you for 8-12 hours.
 - Do not plan make any legal or binding agreements until 12-24 hours after the procedure.
 - Do not drive or operate any dangerous machinery for 12-24 hours after the procedure.
 - Due to limited waiting room space, please allow no more than 2 people to accompany you to your procedure.
 - Due to the procedure and recovery time, please make arrangements for small children.

***If you take blood pressure, heart, seizure, respiratory or restless leg medication, please take it with a sip of water by 6:00am the morning of your procedure.**

***Diabetic Patients Only: Take all diabetic medications normally the day before your procedure EXCEPT take a half dose of your bedtime insulin.**

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*Let the nurse know if you are currently taking any of the following medication:

- Iron
- Insulin
- Blood Thinners (Coumadin – Warfarin, Heparin, or Jantoven)

*Let the nurse know if you are on or have had the following:

- Dialysis
- Known Liver Disease (cirrhosis or hepatitis)
- Known Esophageal Varices
- History of peptic stricture with prior dilations
- Pulmonary Disease
- Require portable or home oxygen
- Severe asthma, bronchitis, or emphysema and take any breathing medications
- Diagnosed with OSA (Obstructive Sleep Apnea)
- Hospitalized in the last few months for respiratory difficulties
- Coronary Heart Disease, Myocardial Infarction (heart attack), or Angina Pectoris
- Coronary Stent placement in the last 3 months
- Recent Joint replacement, Heart Valve replacement, or Vascular Surgery

*Let the nurse know if you require Antibiotics before invasive procedures.

PREPARATION

Nothing to eat or drink after midnight the night before your procedure