



# GI Excellence, Inc.

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## UPPER ENDOSCOPY (EGD) PREPARATION

Patient Name: \_\_\_\_\_ Procedure Date: \_\_\_\_\_

### In Advance, Before Procedure

- **Arrange:** for a responsible adult to stay with you during the procedure and drive you home after the procedure.
- **Stop taking these medications:**  
Plavix (Clopidogrel)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- **Last Day to Cancel:**  
Call the office if you need to reschedule your appointment or if you have any questions:  
(951) 652-2252

### 3 Days Prior Date: \_\_\_\_\_

- **Confirm:** confirm with an adult that you have arrangements to be driven home after procedure.
- **Stop taking these medications:**  
Coumadin (Warfarin)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- If you have Co-Pay, we will call you prior to your procedure to inform you. **Your Co-Payment is due at the time of service. CASH, CREDIT CARD, DEBIT or MONEY ORDER only.**

### 2 Days Prior Date: \_\_\_\_\_

- **Stop taking these medications:**  
Pradaxa (Dabigatran)  
Xarelto (Rivaroxaban)  
Eliquis (Apixaban).
- If we have not called you to tell you your Co-Pay, please call our office (951) 652-2252.

### 1 Days Prior Date: \_\_\_\_\_

- **Midnight:**  
Do not have anything to eat or drink after midnight. You may take any necessary medication with a small sip of water only.
- **Stop taking these medications:**  
Lovenox (Enoxaparin)  
Arixtra (Fondaparinux)

### Procedure Day Date: \_\_\_\_\_

- **Do not have anything to eat or drink until after your procedure is completed.**
- **Bring:**  
Responsible driver, Insurance Card, Photo ID, and Co-Pay fees.
- **Note:**  
The quality of your prep is the one thing you can control and will give the doctor the best view possible without having to repeat the procedure.

You will receive a call from our office the evening prior to your appointment.  
Monday-Friday between 12:00 p.m. - 3:00 p.m. for your procedure check-in time.

Initials: \_\_\_\_\_

Your initials confirm that you have been given this information.



## PLEASE OBSERVE THE FOLLOWING INSTRUCTIONS

- Co-Payment or any money due prior to your procedure must be paid in cash, credit or money order.
- The entrance to the Hemet Endoscopy Center is around the back of the parking lot, Suite #104.

### Diabetic and Weight Loss Medications Guidelines

#### ➤ Discontinue all blood thinners below:

Coumadin (Warfarin)	3 days prior to procedure
Plavix (Clopidogrel)	7 days prior to procedure
Lovenox (Enoxaparin)	24 hours prior to procedure
Arixtra (Fondaparinux)	24 hours prior to procedure
Pradaxa (Dabigatran)	2 days prior to procedure
Xarelto (Rivaroxaban)	2 days prior to procedure
Eliquis (Apixaban)	2 days prior to procedure

#### ➤ If Diabetic please follow these guidelines:

If taking Lantus or long acting Insulin, take only a 1/2 dose at midnight before your procedure, and

**bring Insulin with you the day of procedure.**

Glimepiride (Amaryl) hold day of procedure

Glucotrol (Glipizide) hold day of procedure

Actos (Pioglitazone)

Invokana (Canagliflozin)

Januvia (Sitagliptin)

#### ➤ Weight Loss Medications

- Ozempic
- Monjaro
- Rybelsus
- Wegovy
- Semaglutide

**Instruction:** *These all need to be stopped 1 week prior to procedure.*

- NOTHING TO EAT OR DRINK AFTER MIDNIGHT
- ABSOLUTELY NO EATING OR DRINKING THE DAY OF YOUR PROCEDURE
- YOU MAY TAKE ANY NECESSARY MEDICATION WITH A SMALL SIP OF WATER ONLY!

➤ **Cancellation Policy:** We require a minimum of 4 working days notice of cancellation or there will be a minimum charge of \$200.

- Do not plan on working or driving the rest of the day following your procedure due to sedation given during the procedure.
- **Plan to be in the facility for up to 3 hours for your procedure.**
- **If the Surgery Center waiting room is full, there is extra seating available to patients and drivers in the main lobby located in Suite 101.**
- Please Provide a contact number for procedure confirmation. (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Your initials confirm that you have been given this information.