



Beth Israel Deaconess Hospital
Needham
 Needham Gastroenterology Associates

Dear Patient,

Thank you for choosing Beth Israel Deaconess Hospital *Needham* for your **Gastroscopy**. We want to make sure your procedure goes as smoothly as possible.

Beth Israel Deaconess Hospital *Needham*
Endoscopy and Infusion Center
 148 Chestnut Street
 Needham, MA 02492

Day/Date: _____

Arrival Time: _____

- Note: Medical procedures do not always go according to schedule, there may be unexpected delays in your procedure. We thank you in advance for your understanding and patience.
- **PLEASE READ ALL INSTRUCTIONS TODAY!** Refer to the medications listed below that need to be stopped days before your procedure.

Please **leave valuables (jewelry, money, credit cards, or electronic devices) at home** when you come in for your procedure.

Please register in Admitting on the Ground Floor prior to reporting to the Endoscopy Center unless preregistered by phone. You will need your insurance card and a picture ID.

Medication List and Sleep Apnea Form – please bring your **completed** Medication List and Sleep Apnea Form with you on the day of your procedure.

Internal Defibrillator and/or Pacemaker – If you have an Internal Defibrillator and/or Pacemaker, please call the Endoscopy and Infusion Center at 781-453-3885 and ask to speak to a nurse. Please have your Internal Defibrillator and/or Pacemaker information, cardiologist’s name, and contact information available for reference during the call. Please bring the device card with you on the day of your procedure.

Infectious Disease – If you have ever been diagnosed with an infectious disease i.e., MRSA, VRE, please call the office of Drs. Cohen, Tomczak, and Ullman at 781-444-6460 prior to your procedure.

If you are or may be pregnant, please discuss the risks and benefits of this procedure with your doctor prior to your procedure.

Medications

- **Aspirin or Aspirin Products**- stop 5 days prior to your procedure. The exception to this is for patients who have a cardiac stent. **CARDIAC STENT PATIENTS SHOULD REMAIN ON THEIR ASPIRIN.**
- **Ibuprofen, Motrin, Advil, Aleve, and other Anti-Inflammatory Medications**-**must be stopped** 48 hours prior to the procedure.

- **Coumadin, Lovenox, Aggrenox, Pradaxa, Xarelto, or Eliquis** or any other blood thinning medications: please call your prescribing physician for instructions.
- For patients who have a **cardiac stent** and are taking **Plavix**, please contact your cardiologist.
- **Diabetics:**
 - If you are taking an **oral diabetic medication**, please **do not** take your dose the **evening before** your procedure and **do not** take your dose the **morning of** the procedure.
 - If you take **Insulin**, please call your prescribing doctor for further instructions.
- **Prescription Medications** may be taken the morning of your procedure, at least three hours prior to your arrival time with as little water as possible.

Procedure Preparation

- Please do **not** eat or drink anything after **midnight** on the night before your procedure.
- You may continue sips of clear liquids until three hours prior to arrival time (including am prescription meds).

Going home

- **Arrange for a ride home.**
- A responsible adult will need to pick you up in our Center **2 hours** after your **scheduled arrival time**. A taxi is allowed only if a responsible friend or family member accompanies you.
- After sedation, you may **not** drive for the remainder of the day. Do not plan to work or perform work related tasks for the rest of the day due to the lasting effects of the sedation.

We hope this information has been helpful. Be sure to read the rest of the information in this packet. If you have any questions, please call 781-444-6460.