

## **INSTRUCTIONS FOR UPPER ENDOSCOPY**

**\*TWO WEEKS** from your scheduled Upper Endoscopy stop all over the counter supplements, diet pills (this includes over the counter and prescription diet pills), or herbal medications. Examples include Fish oil, garlic, Co Q10, Glucosamine, Ginger, Gingko, Saw Palmetto, Red yeast rice, ephedra, and Cinnamon. If you are unsure then call the office at 423-495-4730.

**\*FIVE DAYS** before your Upper Endoscopy stop all NSAIDs like aspirin, Aleve, Ibuprofen, Goody Powder, BC powder, Advil, Ecotrin, Relafen, Naprosyn, Voltaren, and Mobic. You can take Tylenol as needed for pain while off these NSAIDs. Stop all iron supplements also. If you are unsure then call the office at 423-495-4730. **\*\*DO NOT STOP ASPIRIN IF TAKING FOR CARDIAC OR STROKE RELATED PROBLEMS.\*\***

\*\*\*If you take an anti-**coagulant** such as Coumadin, Jantoven, Plavix, Pradaxa, please make sure this office is aware and we will instruct each patient individually.

\*\*\*Hold all **DIABETIC** pills like Glyburide, Metformin, and Actos and others in that family morning of the scope. **If you are a diabetic** and take insulin please contact the physician that controls your diabetes to confirm how this should be taken on the day of your prep and the morning of the scope.

Otherwise, continue your routine prescription medications. If you are unsure about any medication please call the office at 423-495-4730. **\*\*DO NOT TAKE REFLUX MEDICATION IF HAVING AN UPPER SCOPE.\*\***

**\*\*\*Do not eat or drink anything after midnight the night before your procedure, with the exception of the morning of the procedure you may have a very small sip of water to take your heart, breathing, or blood pressure medications.\*\*\***

Due to sedation, you are not allowed to drive. You must have a responsible adult bring you to the procedure, stay at the facility while your procedure is being done, and then take you home. This is required by all facilities we use.

You will be instructed by Dr. Shikoh, the facility or your discharge instructions regarding a need for a follow up.

**\*\*DO NOT STOP ASPIRIN IF TAKING FOR CARDIAC OR STROKE RELATED PROBLEMS\*\***

**\*\*HOLD ALL DIABETIC PILLS THE MORNING OF THE PROCEDURE ONLY\*\***

**\*\*DO NOT TAKE REFLUX MEDICATION IF HAVING AN UPPER SCOPE\*\***