

## **EGD Prep Instructions**

My procedure will be done at the following location:

| Denton Surgery Center | Denton Presbyterian Hospital | Medical City Surgery Center |
|-----------------------|------------------------------|-----------------------------|
| 2515 Scripture St     | 3000 N Interstate 35         | 3316 Colorado Blvd          |
| Denton, TX 76201      | Denton, TX 76201             | Denton, TX 76210            |
| Phone: 940-383-7100   | Phone: 940-898-7000          | Phone: 940-349-5500         |
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| 7 Days Prior to Procedure  | One Day Prior to Procedure  | Day of Procedure  |
|--|---|---|
| Arrange transportation All patients must be accompanied by a               | Adhere to your normal diet<br>today, unless instructed otherwise. | NO SOLID FOODS  |
| responsible adult at time of check-in for procedures as well as discharge. | ,,  | ■ Clear liquid diet only  |
| Total time at the facility is about 3 to                                   |   | Medications that must be  |
| 4 hours.   | Special instructions:   | taken in the morning are okay with small sips of water. Take at |
| NO taxi, bus Uber, or Lyft. These<br>are not acceptable means of           |   | least 2 hours prior to your arrival                             |
| transport after a medical procedure.                                       |   | time.   |
| If you do not have a ride lined up, your procedure will need to be         |   | 2 HOURS before your arrival                                     |
| rescheduled.   |   | time, ABSOLUTE FASTING IS REQUIRED.                             |
| AVOID all NSAIDs, such as Aspirin,   |   |   |
| Ibuprofen (Advil), and naproxen (Aleve).                                   |   |   |
| Baby Aspirin 81 mg is okay to take.  |   |   |
| ■ Tylenol is okay to take as needed  |   |   |
| for pain. Continue your other medications as prescribed.                   |   |   |
| medications as presented.  |   |   |

| My follow up appointment to discuss results is scheduled for: |  |  |
|---|--|--|
| ons as prescribed.  |  |  |
|   |  |  |