

# EGD Instructions

## The Facility you will go to:

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| <input type="checkbox"/> South Arkansas Surgery Center<br>2704 Vine St, El Dorado, AR 71730<br>870-862-1636<br>Check in at Main Entrance | <input type="checkbox"/> South Arkansas Regional Hospital<br>700 W. Grove St, El Dorado, AR 71730<br>870-862-3000<br>Check in at Main Entrance of Hospital |
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You will arrive at the Facility on \_\_\_\_\_ @ \_\_\_\_\_ am/pm.

**Please follow the instructions below. Failure to read and comply with these instructions jeopardizes the safety of your procedure and may result in the late cancelation of your procedure and a \$150 CANCELLATION FEE**

Please be sure that you will have a responsible adult with you to take you home. If you do not have a responsible adult with you to take you home, your procedure cannot be done and will be cancelled.

You cannot eat or drink anything after midnight, the night before your procedure. This includes gum, hard candies, dip, and chewing tobacco.

### Information about Medications

#### The following medications will need to be held prior to your procedure:

- Plavix (clopidogrel), Effient – stop \_\_\_\_\_ days prior to your procedure
- Coumadin (warfarin), Pradaxa, Xarelto – stop \_\_\_\_\_ days prior to your procedure
- Aggrenox – stop \_\_\_\_\_ days prior to your procedure
- Brilinta – stop \_\_\_ days prior to your procedure
- Eliquis – stop \_\_\_ days prior to your procedure
- Adipex (phentermine) and all other diet pills – stop 14 days prior to your procedure
- Ozempic, Mounjaro, Semaglutide or similar injections – stop 7 days prior to your procedure
- Iron supplements – stop 7 days prior to your procedure

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**Call us *immediately* if you experience any shortness of breath, chest pain, new cardiac issues, or if you are scheduled for any cardiac testing.**

If applicable, **take your blood pressure and heart medications with a small sip of water the morning of your procedure.**

If you take medicines for diabetes, call the doctor who manages your diabetes to discuss how to manage your medicines for this procedure. **You should not take your oral diabetes medication on the day of your procedure** unless otherwise instructed. **If you take injectable insulin, we recommend that you hold your morning dose.**

#### Things to remember

- Take only the medicines you were instructed to take the morning of your procedure. Take them with a few sips of water.
- Do not wear any lotions, creams, or powder.
- Take off any jewelry, including body piercings.
- Leave all valuables, such as credit cards and jewelry, at home.
- If you wear contacts, wear your glasses instead.

**FAILURE TO COMPLY WITH THESE INSTRUCTIONS MAY RESULT IN CANCELLATION OF YOUR PROCEDURE AND \$150 CANCELLATION FEE.**

**If you have any questions, please call or text our office at (870) 881-9311.**

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## What to bring

- Your picture ID, insurance cards, list of all medications you currently take, and any payment that is due at the time of the procedure
- Your rescue inhaler (such as albuterol for asthma), if you have one
- A case for your glasses or dentures, if you wear them

## CANCELLATION POLICY

- Our Policy allows for two re-schedules only.
- Cancellations/re-schedules must be made **THREE BUSINESS DAYS IN ADVANCE**
- Cancellations/re-schedules made less than **THREE BUSINESS DAYS IN ADVANCE** will be subject to the **\$150 Cancellation fee**.
- If you cancel your procedure with the facility, you must also immediately contact this office and cancel with the physician.

## Results and Follow-Up

Results will be given both verbally and in written form right after the procedure. They will be discussed with you and anyone waiting for you if you so direct. *Pathology results will be mailed to you within 2 weeks.* We will contact you by phone if anything needs immediate follow-up. If you have not heard anything after 2 weeks, then contact the office for your results.

Office follow-up is usually not necessary. If you would like a follow-up appointment or other issues are involved, please call our office. Your next recommended colonoscopy is usually based on family history, findings at the time of colonoscopy, pathology results or other risk factors.

## Financial Statement and What to Expect

It is the *patient's responsibility* to make sure all offices have the correct insurance(s).

You will receive *AT LEAST* two separate statements for your procedure.

- One statement will be addressed from *Surgical Office of Morgan & Kennedy*. This bill is a result of the professional services provided to you. This is the fee we have charged you for doing the procedure.
- Another statement will be from the facility where your procedure took place. This bill is a result of the facility fee.
- Anesthesia services will also address a statement to you.
- If any biopsies were taken during your procedure, you will receive a separate bill from Lab/Pathology.

Your insurance company will be billed separately for each of these charges. Once your insurance company has paid, it will be reflected on your statement. Please make arrangements to pay the portion that is not covered by your insurance company as soon as you receive your first statement.

Please note that all insurances are different, and it is the *patient's responsibility* to call their insurance and find out what procedures are covered and what is not.

If you have any questions regarding your statements, please call that office directly.

**South Arkansas Surgery Center:** 870-862-1636

**South Arkansas Regional Hospital:** 870-863-2000

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**If you have any questions, please call or text our office at (870) 881-9311.**