

MILFORD GASTROENTEROLOGY ASSOCIATES

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GASTROSCOPY

Reminders:

- You must have a family member or friend drive you home after the examination due to the medications that are given to you during the procedure.
- Please bring with you to your procedure a list of all your current medications.
- If your insurance changes, you must notify the office at 508-478-6363 prior to your procedure. You will be responsible for any charges due to lack of correct insurance information.

Before your examination:

- **ATTENTION: If you are taking Coumadin, Plavix or Aggrenox, please check with the office for instructions PRIOR TO STARTING THIS PREPARATION.**
- If you have diabetes and take oral agents or insulin, you will receive a separate sheet of instructions regarding these medications.
- If it is necessary for you to cancel this appointment after 5 p.m., please call 508-473-1190, ext. 2860.
- Nothing to eat or drink after midnight.

Day of examination:

1. Take all blood pressure and heart medication with a small amount of water.
2. Please bring to the hospital a list of medications that you are taking, including the name of the medication, dosage and how you are taking it. Also, please bring a list of your allergies and the attached completed patient database.
3. If your appointment is late afternoon, you may have clear liquids up to 2 hours before the procedure.

Because of the sedation used during the procedure, you must have someone available to drive you home. A responsible person must be present in the Endoscopy Unit at discharge time to drive you home. Public transportation (taxi) is not legally acceptable after conscious sedation. We will have to rebook your appointment if a ride is not available. You will not be able to drive for 12 hours after your procedure because of side effects of the sedation. Your ride does not have to remain at the hospital during your procedure but must be available to take you home.

Report to:

- This test is done in the Hill Health Center of the Milford Regional Medical Center. Please report to the Hill Outpatient Desk 45 minutes before your scheduled appointment. Total time at the hospital will be approximately 2 hours.

This examination will take approximately 45 minutes, but this may vary from patient to patient. After the examination is completed, you will spend approximately 1/2 hour to 1 hour in our recovery area. Please keep in mind that this is an estimated appointment time. Because the time involved in each procedure is often unpredictable, and procedures are scheduled to follow each other consecutively, there are occasions when the schedule runs behind. Your patience and understanding are appreciated.

Day after examination:

- You can expect to resume normal activities again unless otherwise indicated. After the procedure, you will be given instructions about diet and medications.

Remember:

- Please pre-register by calling 508-422-2222 within 2 weeks of your appointment.
- Complete your patient database form and bring it with you to the hospital on the day of your procedure.

NOTICE: A 48-hour cancellation notice is required for all Office Appointments or scheduled Endoscopic Procedure Appointments. A missed Office or Endoscopic Procedure (Colonoscopy/Upper GI Endoscopy, etc.) appointment will incur a \$50 charge. This \$50 fee is NOT covered by your health insurance.

Milford GI Associates strives to schedule all patients for Office Appointments or Procedures as promptly as possible. Because of the great need for GI services in our community, these Appointments are very important and a Missed Appointment without prior notification adversely impacts other patients who may be waiting for an appointment.

These Appointments require the careful coordination of the schedules of our Patients and the Physicians and Nurse Practitioners of Milford GI Associates. In the case of scheduled Endoscopic Procedures, the Endoscopy Unit and Nurses at the Milford Regional Medical Center require additional consideration. Please help us, our Hospital and all members of our community by providing a 48-hour cancellation notice.

