

**JEFFREY R. CRIST, M.D.**  
**JUAN BENITEZ, M.D.**  
9349 PARK WEST BLVD.  
SUITE 101  
KNOXVILLE, TN 37923

Phone: (865) 539-5372  
Fax: (865) 539-5369

---

## **EGD: PREPARATION INSTRUCTIONS**

YOU HAVE BEEN SCHEDULED FOR A DIAGNOSTIC PROCEDURE CALLED

**ESOPHAGOGASTRODUODENOSCOPY (EGD)** TO BE PERFORMED ON:

\_\_\_\_\_ **AT:** \_\_\_\_\_ **ARRIVAL TIME:** \_\_\_\_\_

YOU WILL NEED TO REPORT TO: \_\_\_\_\_ **PARKWEST HOSP. (MAIN ENTRANCE)**

\_\_\_\_\_ **FT. LOUDOUN HOSP. REGISTRATION (ER/ Reg. Desk)**

**LATE ARRIVAL MAY RESULT IN UP TO A TWO-HOUR DELAY FOR YOUR PROCEDURE.**

### **PRE-PROCEDURE INSTRUCTIONS:**

**1. TAKE NOTHING BY MOUTH AFTER MIDNIGHT THE NIGHT PRIOR TO OR THE MORNING OF YOUR PROCEDURE.**

**2. MEDICATIONS:**

- IF YOU HAVE SPECIFIC MEDICAL PROBLEMS SUCH AS SEVERE HIGH BLOOD PRESSURE OR ANGINA, YOU MAY TAKE YOUR MORNING PILLS WITH A SMALL SIP OF WATER EARLY ON THE DAY OF YOUR TEST. IF YOU HAVE ANY QUESTIONS REGARDING OTHER MEDICATIONS PLEASE CALL THE OFFICE.
- IF YOU TAKE ANTICOAGULANT MEDICINES (COUMADIN /PLAVIX) OR ASPIRIN PLEASE DISCONTINUE IT AT LEAST 5 DAYS PRIOR TO YOUR TEST.
- AVOID TAKING PRODUCTS CONTAINING IBUPROFEN (ADVIL) OR NAPROXEN (ALEVE) PRODUCTS FOR 2 DAYS PRIOR TO YOUR PROCEDURE

**3. BRING SOMEONE ALONG WITH YOU TO DRIVE YOU HOME.**

- YOU WILL BE SEDATED BEFORE THE EXAMINATION. WHILE MOST OF THE EFFECTS OF THE MEDICINE WILL WEAR OFF PRIOR TO YOUR DISCHARGE, WE CANNOT LET YOU LEAVE UNACCOMPANIED. YOU WILL NOT BE ABLE TO DRIVE THE REMAINDER OF THE DAY.

**IF YOU HAVE ANY QUESTIONS OR HAVE AN EMERGENCY ON THE DAY OF YOUR EXAM PLEASE CALL OUR OFFICE AT 865-539-5372 X226. PLEASE ALLOW AT LEAST 48 HOURS NOTICE ON CANCELLATIONS OR RESCHEDULING OF PROCEDURE APPOINTMENTS.**

**\*\*\*PLEASE BRING I.D., INS. CARDS AND LIST OF CURRENT MEDICATIONS WITH YOU\*\*\***

**PLEASE LEAVE ALL VALUABLES AT HOME**