

San Diego Gastroenterology Medical Associates

4060 Fourth Avenue, Suite 240 San Diego, California 92103

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Flexible Fiberoptic Sigmoidoscopy

Your Procedure has been scheduled for: _____ With Dr. _____

Check in time: _____ Procedure time: _____

- Scripps Mercy Hospital 4077 Fifth Avenue. (619) 260-7026
Check in at "Cardiology/Endoscopy Registration" on the 2nd floor (next to Surgery)
- San Diego Endoscopy Center 4033 Third Avenue, Ste. 106 (619) 497-2888

You must cancel or reschedule 7 (seven) working days in advance in order to avoid a cancellation/reschedule fee. Please call the office to speak with our procedure scheduler 619-291-6064 ext. 210

What to bring

- Insurance card, ID card and credit card or other form of payment if your insurance requires you to pay a copay.
- Completed forms (if applicable) for the endoscopy center.
- A list of all your prescription and over the counter medications.
- A responsible adult to take you home after the procedure.
- Warm socks for the procedure and flat shoes for after the procedure.
- Please avoid wearing contact lenses or bringing jewelry/ valuables.

Please follow these instructions:

1. STOP taking all aspirin-containing products (Anacin, Excedrin, etc) **7 days** before your procedure. All other pain and arthritis medications (Advil, Motrin, Aleve, etc.) must be stopped **48 hours** before procedure. Tylenol is an acceptable replacement for these pain and arthritis medications. If you are required to take an aspirin daily by your physician (i.e for your heart disease, stroke prevention) this may be continued.
2. If you take *Coumadin* or *Plavix*, please contact the doctor immediately for instructions. You may need to hold these medications for **3-7 days** before your procedure.
3. After **12 midnight** prior to your procedure do not eat anything. Drink only water. STOP drinking water **3 hours** before your procedure
4. Arrange a ride home from the procedure. You will receive intravenous sedation and **will not** be able to drive for **18 hours** following this procedure.
5. Purchase **2 boxes** of *Fleets* "Ready to Use" saline enemas from any drug store. They come in a green and white box.

The day of your procedure instructions:

1. You will take **one** *Fleets* enema **3 hours** before your appointment _____
2. You will take **one** *Fleets* enema **2 hour** before your appointment _____

Patient Checklist

IF YOU ARE AFFECTED BY ANY OF THE CONDITIONS LISTED IN THE CHART BELOW, PLEASE FOLLOW THE INSTRUCTIONS PROVIDED.

Diabetes	<p>Check with your physician regarding your dose of insulin and other diabetic medications needed the day before and the day of your procedure. Typically, we recommend that you do not take your oral hypoglycemic or insulin before your procedure. Bring it with you to take after your procedure.</p> <ul style="list-style-type: none"> • If you take insulin, please take ½ of your usual dose the day before and ½ of your usual dose the day of the procedure. • If you take diabetes pills, please do not take any the day before your procedure.
Coronary stent in the past 6 weeks	Please inform the nurse and your physician.
Aspirin	If you are taking aspirin PRESCRIBED by your MD please continue to take it. If you do not have a heart or blood vessel or clotting disorder, and you are taking aspirin on your own without a doctor's advice, please stop taking aspirin 5 days before your procedure.
Coumadin, Plavix, Heparin, Lovenox, Effient or other anticoagulants	<p>Ask the physician who prescribed your medicine how to take it before and after your procedure. If you cannot contact your physician, call us several days before your exam. If you take Coumadin, you may need a blood test two hours before your exam.</p> <p><u>Please do not assume that you can safely follow the same medication adjustments that have been made for your previous procedures.</u></p>

Important Reminders

- Please allow 2 – 3 hours for the procedure.
- The Physician's fee is separate from the facility fee. There may also be a pathology fee if biopsies are taken.
- Many insurance carriers and managed care organizations require preauthorization or precertification. *If you have specific questions about coverage for your upcoming procedure, please contact your insurance company.*
- **Notify the office immediately if there are any changes to your insurance.** As a courtesy we will make every attempt to obtain the authorization for these procedures, to ensure this takes place we need to have the correct information on file.
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