

Dr. Donald Walters, Dr. Krysia Zancosky and Dr. Faye Abboud

UPPER ENDOSCOPY/ESOPHAGOSCOPY/Placement of Feeding Tube

NAME: _____ PROCEDURE
DATE: _____

LOCATION:

Benbrook Medical Center, Building #1, 102 Technology Drive, Butler PA

Butler Memorial Hospital, One Hospital Way, Butler, PA

Medication Restrictions:

If you are taking any of the blood thinners listed below, you **MUST** call and inform the doctor prescribing these medications that you are referred for a colonoscopy. Contact the prescribing provider **at least one week** prior to the procedure to ask if it is safe to stop your blood thinner. Also clarify when you should stop and restart the medication. If your physician instructs you **NOT** to stop the medication, please **NOTIFY** our office immediately.

Coumadin
Pradaxa
Eliquis
Brilinta

Warfarin
Xarelto
Effient
Plavix

If you are taking an **iron supplementation** or **iron-containing medication** including a multi-vitamin, you **MUST** stop taking these medication **seven (7) days** prior to your procedure.

If you are taking **Concerta** or **Tenuate (diethyldihydroxyacetone)**, you need to hold these medications for **seven (7) days** prior to your procedure. Please check with your doctor before holding these medications.

You **MAY** take any **cardiac** or **blood pressure medication** as usual, at least **two (2) hours** prior to your procedure with just a sip of water.

If you are prescribed any of the **GLP-1 receptor agonist** for treatment of **type 2 diabetes** and **weight loss** listed below, please hold all weekly injections one week prior to procedure. All daily injections and oral medications need to be held the day of the procedure until after your procedure. Contact your prescribing provider to confirm that holding these medications is okay.

Trulicity
Victoza
Mounjaro
Wegovy
Rybelsus
Phentermine

Bydureon
Saxenda
Ozempic
Adlyxin
Byetta
Contrave

If you are **diabetic**, please **DO NOT** use **insulin** or take any **other diabetic medication** on the day of the procedure until after your procedure, unless otherwise instructed by your primary care physician.

All other medication only need to be held the day of your procedure. These include, but are not limited to prescription medications, supplements, Aspirin, Ibuprofen, Motrin, Advil, Naprosyn, Naproxen, Aleve, Fish Oil, Omegas and Glucosamine. You may take these the evening prior and/or as soon as you return home.

Secure a Driver

Since you will be receiving sedating medications or narcotics, you are required by law to be accompanied by someone to drive you home when you are ready for discharge. You may not drive or return to work until the morning after your procedure.

GENERAL INSTRUCTIONS

Nothing to eat or drink after midnight prior to your scheduled procedure.

ADDITIONAL INFORMATION:

You will be contacted by telephone the business day before your procedure to confirm your arrival time. If you need to cancel, please call our office at 833-391-0654 or the number listed below for the facility at which you are scheduled. **IF YOU DO NOT RECEIVE A CALL BY 3:00PM REGARDING YOUR ARRIVAL TIME, PLEASE CONTACT THE FACILITY IN WHICH YOU ARE HAVING YOUR PROCEDURE.**

PLEASE REFER TO THE NUMBER BELOW FOR ARRIVAL TIME ONLY (ALL OTHER CALLS SHOULD BE DIRECTED TO OUR OFFICE):

Benbrook Surgical Center 724-431-0740

Butler Memorial Hospital 724-284-4595