

Broadway OBS
Ocean Parkway Endoscopy OBS
GARY I. GORODOKIN, M.D.
Board-Certified Gastroenterology/Hepatology

POST INSTRUCTION FOR UPPER ENDOSCOPY (EGD)

PATIENT _____

DATE _____

RESTRICTION ON ACTIVITY:

1. Do not drive or operate machinery until the day after procedure
2. Following day – return to usual activity, unless otherwise instructed
3. Diet: avoid alcohol for 24 hours after procedure; otherwise eat and drink as usual
4. Do not sign any legal documents for 24 hours

TODAY YOU MAY EXPECT:

1. Mild abdominal pain, cramping and bloating
2. Dizziness , lightheadedness or sleepiness for 6-12 hours after your procedure

CALL DR. GORODOKIN IF:

1. You have severe abdominal pain or bloating
2. You have severe nausea or vomiting
3. You develop chills or fever occurring within 24 hours after procedure
4. You develop severe chest pain or shortness of breath
5. You have new or increasing bleeding
6. Intravenous (IV) site swelling or red

FOR THE NEXT 7 DAYS

Limit travel

**DO NOT USE ASPIRIN, PLAVIX, COUMADIN, MOTRIN, ADVIL,
IBUPROFEN OR VITAMIN E** (*unless otherwise instructed*)

SPECIAL INSTRUCTIONS

Wait for Pathology report (if biopsy was taken or polyp was removed)
Follow up in office in 1 week

I have read and understand the discharge instruction. I have no further questions. I have received a copy of the instruction.

Patient/Responsible Party signature was placed on Consent Form to this procedure