



Albany Gastroenterology Consultants, P.C.

YOUR PROCEDURE IS SCHEDULED AT:

___ ENDOSCOPY CENTER - 1375 Washington Avenue, Albany (2nd Floor, Suite 201)

___ ST. PETER'S HOSPITAL - 315 South Manning Boulevard, Albany (4TH Floor, Ambulatory Surgery)

PATIENT NAME: _____ PHYSICIAN: _____

PROCEDURE DAY/DATE: _____

PROCEDURE TIME: _____ ARRIVAL TIME: _____

PREPARED BY: _____ Ext. _____

Preparation Instructions:
Flexible Sigmoidoscopy
Fleet Enema

Review the preparation schedule below for the days preceding your flexible sigmoidoscopy. If you need further assistance, please call (518) 438-4483.

*If you have a change in insurance prior to your procedure, you must notify the office immediately.

<u>1 Week Prior</u>	<u>3 Days Prior</u>	<u>1 Day Prior</u>	<u>Day of Procedure</u>
Purchase the following <ul style="list-style-type: none"> Fleet Enema (1 or 2 bottles as directed by your physician) <p>If you are an INSULIN DEPENDENT DIABETIC, you must notify this office when you schedule your procedure.</p> <p>You may continue your "baby" or regular aspirin. Let us know if you are on Plavix, Coumadin or Lovenox. STOP taking these medications: _____ _____</p>	<p>Last chance to cancel appointment. Our office requires a minimum of 48 hours notice when canceling or rescheduling a procedure. Please call our office if you need to reschedule your appointment: 518-438-4483</p> <p>YOUR BOWEL PREP IS EXTREMELY IMPORTANT!</p> <p>IT IS VERY IMPORTANT TO HAVE A 'CLEAN' COLON SO THAT YOUR DOCTOR MAY VISUALIZE ANY ABNORMALITIES!</p>	<p>You may have a normal diet throughout the day UNTIL MIDNIGHT.</p> <p><u>NOTHING TO EAT AFTER MIDNIGHT.</u></p> <p>You may have clear liquids up to six hours prior to the time of the procedure.</p> <p>Clear liquid diet - Includes: Water, broth, bouillon, consommé, coffee or tea without milk or creamer, Gatorade, soft drinks, juices (no pulp), Italian ices, popsicles, Jell-O (except red or purple).</p>	<p>Fleet Enema –</p> <p><input type="checkbox"/> One bottle</p> <p><input type="checkbox"/> Two bottles</p> <p>Take Fleet Enema(s) at _____ (one hour prior to arrival time).</p> <p>You may take your essential morning medications unless otherwise directed by your physician.</p> <p>You may have clear liquids up to six hours prior to the time of the procedure.</p> <p>Arrive one hour before scheduled procedure time.</p> <p>Biopsy results: Please call our office if you have not heard from us within 10 business days of your procedure.</p>