EGD (Endoscopy) Preparation Instruction

内窥镜 胃镜 检查注意事项

Date of Procedure (检查日期)	Location (地点) :
Arrival Time (签到时间) :	Procedure Time (检查时间):

- Arrange Ride Home
 - You will not be able to drive yourself because of sedation. BART, Taxi, Limousines, and public transportation are not allowed.
- 您需要请人代驾
 - o 由于检查中需要使用麻醉药物 请您在检查当日不要亲自驾车 也请不要使用地铁 出租车 等其它公共交通工具。

When (日期)	Action (注意事项)	Examples (举例)
When (日期) 5 Days Before 检查前5日 NO BLOOD THINNERS; 停用血液稀释剂 NO ASPIRIN 停用阿司匹林	Action (注意事项) Stop taking antiinflammatory medications (申止使用抗炎药物 Confirm with your doctor if you need to stop any of your blood thinners 在停止使用血液稀释剂之前请与您的医生确认 No seeds such as tomato products or sesame seed 请勿使用种子类食物 例如西红柿类或是芝麻	 Ibuprofen, Naproxen, Advil, Motrin, Nuprin, Indomethacin, Celebrex, Heparin, Aggrenox, etc-stop 5 days prior 检查前5日停用 布洛芬萘普生 Advil 美林 努普林 肝素 脑康平等 Coumadin – stop 5 days prior 检查前5日停用华法林 Plavix – stop 7 days prior 检查前7天停用波立维 Lovenox – do not take within 24 hours 检查前24小时停用依诺肝素 Pradaxa – stop 2 days prior (4 days if CKD) 检查前2天停用泰必全 如有慢性肾病请提前4天停药
		 Xarelto/Eliquis/Savaysa – do not take within 24 hours (48 hours if CKD)

		• 检查前24小时停用拜瑞妥/ 艾乐妥/依度沙班 慢性肾 病患者请提前48小时停 药
Day Before 检查前1日	 Breakfast and lunch normally 早餐和中餐正常饮食 Light dinner 晚餐清淡饮食 Do not eat or drink anything within 8 hours of your procedure 检查前8小时内禁止饮食 	 You can take your usual medications unless instructed otherwise by your physician with sips of water 用少量水服用日常药物(除注意事项中提到的药物) Modify diabetes medications if instructed by your doctor 按医嘱服用糖尿病药物
Day of the Exam 检查当日	 2 hours before procedure nothing by mouth. 术前2小时 禁止一切饮食 	 Wear loose comfortable clothing 请穿着宽松舒适的衣物 Leave valuables and jewelry at home 请勿携带珠宝及贵重物品 Bring photo ID and insurance card 请携带ID和医保卡 Bring a complete list of medications and allergies 请提供完整的使用药物及过敏列表
After Endoscopy 检查之后	Rest请注意休息	 No driving for the rest of the day or making major decisions. 检查后请勿驾驶汽车 同时 检查当日请勿做重大决定

If you need to cancel or reschedule, kindly give 5 business days to do so or there will be a \$100 fee; this will not be covered by your insurance company.

如果您需要取消或是更改检查日期,请提前**5**天联系我们。否则您将支付**\$100**的违约金,保险公司 不会报销您的违约金。

If you have any more questions, please call our office at (925)776-7600.

如果您还有其他疑问请致电(925)776-7600。