

Your instructions for your **GASTROSCOPY WITH BRAVO**

Location: The Center for Digestive Endoscopy: 1817 N. Mills Ave, Orlando, FL 32803 Phone: 407-896-1726

Date: _____ Time: _____ Arrival Time: _____

IMPORTANT INFORMATION:

1. If you are taking ANY blood thinner, i.e. Coumadin (Warfarin), Plavix, or Pradaxa. Please contact our office for instructions on the possibility of stopping the medicine.
2. If you take any dosage of Aspirin – **DO NOT STOP TAKING IT!** Continue as normal.
3. If you are SICK, have ANY cold symptoms, taking ANTIBIOTICS, pending street, heart test or any major changes in your medical history – **Please call our office IMMEDIATELY for instructions.**
4. Avoid using un-prescribed recreational/street drug(s) including marijuana for 24hrs prior to the procedure.
5. Five (5) days before your procedure – STOP taking any iron pills, fish oil, vitamin E, herbal medicines or Pepto-bismal.
6. **Check with your gastroenterologist if you are to stop your heartburn medication prior to your test. (Ex.Nexium, Prilosec, Aciphex)**

DAY BEFORE YOUR PROCEDURE:

1. DO NOT take any ORAL diabetic medication on the day of your prep and the day of your procedure. **For Insulin dependent patients – Please call the doctor that controls your diabetes for instructions.**
2. Daily medication may be continued, unless otherwise specified.
3. **NO SOLIDS AFTER 6PM. ONLY CLEAR LIQUIDS ARE OKAY AFTER 6PM.**
4. Continue drinking clear liquids, at least another liter during the course of the evening.
5. **NOTHING BY MOUTH AFTER MIDNIGHT.**

CLEAR LIQUIDS INCLUDE: **NO RED/PURPLE COLORS, NO MILK OR MILK PRODUCTS OR ALCOHOL**

- Broths (Only liquid)
- Clear fruit juices (apple, white grape)
- Soda, Gatorade,
- Popsicle
- Water, Coffee & Tea
- Ensure CLEAR or Pedialyte
- Jello-O,
- Sorbet/Frozen Ices

DAY OF THE PROCEDURE:

1. ****NOTHING BY MOUTH** –this includes water, gum, mouth spray, candy or mints
2. You **MUST** take your Blood pressure, Heart, Seizure, Parkinson's, Asthma or Myasthenia Gravis medication (if normally taken in the morning) **three (3) hours prior to arriving with a small sip of water.**
3. You **MUST** have a responsible adult (over the age of 18 years old) who will remain with you in the center and take you home. Driver must be in the facility throughout the duration of your procedure.
4. Items NOT allowed for your procedure: jewelry, cell phones and watches. Also, please do not wear heels or wedges.

What you need to know about the BRAVO:

Date is transmitted to the receiver when the capsule and receiver are within three (3) feet of each other. You can place the receiver outside the shower or on your nightstand at night. You will go home with a diary to write down the times of when you have any reflux symptoms, when you eat and/or when you lie down. Your test will last about 48 hours. It will automatically shut off after the 48 hours have been completed.

You MUST return the received to Center for Digestive Endoscopy on _____ between 6:00 – 8:00 am. It's important to return it on time as there are other patients waiting for the same scheduled procedure and will need the receiver.

The information transmitted to the receiver will be downloaded and a report will be given to your doctor for interpretation. Results are available about two (2) weeks after your test. Several days after the test the capsule will naturally fall off the wall of the esophagus, pass through your digestive tract and be eliminated from your body. Restrictions apply as the capsule has a magnet on it. **NO MRI studies 30 days after your BRAVO procedure.**

****FAILING TO FOLLOW INSTRUCTIONS WILL RESULT IN CANCELLATION OF YOUR PROCEDURE (FEE WILL APPLY) ****

We require a 48 hour notice for cancellations to avoid a \$100 charge

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Financial Policy: Any co-pay and/or deductibles will be collected at the time of service. Please call our billing department at least one week before your procedure at 407-896-1726 for further assistance.

Patient Signature: _____

Date: _____