

Upper Endoscopy (EGD) with Bravo Prep

Upper endoscopy enables the physician to look inside the esophagus, stomach, and duodenum (first part of the small intestine). The procedure might be used to discover the reason for swallowing difficulties, nausea, vomiting, reflux, bleeding, infection, tumors, indigestion, abdominal pain, or chest pain. Upper endoscopy is also called **EGD**, which stands for esophagogastroduodenoscopy (eh-SAH-fuh-goh-GAS-troh-doo-AH-duh-NAH-skuh-pee). The Bravo pH Monitoring System is used to investigate and document the pH levels in the esophagus over 48 hours in patients with acid reflux type symptoms. During the EGD, the doctor places a small pH capsule at the base of the esophagus. You will carry a receiver on your waistband that will gather data of the pH levels in your esophagus during testing. You will be asked to keep a diary log of your symptoms and activities during that time. At the end of the 48 hours you will be asked to return the receiver and your diary log to the nurses at the hospital. The report will be sent for interpretation to the ordering physician. The capsule will naturally fall off the wall of your esophagus and pass through your system. You should not have an MRI within 30 days of this test.

Consult your Primary Care Physician if you are taking or have the following medical concerns:

Coumadin/Jantoven/warfarin: Stop it five (5) days before your EGD **if approved by your physician prescribing it. Do not take this medication on the day of your procedure. Ask your physician when to resume this medication**

Plavix (clopidogrel)/Pradaxa/Pletal (cilostazol)/Effient and Eliquis; Stop it three (3) days before EGD-**only if approved by prescribing physician**

Brilinta: Stop five (5) days before EGD- **only if approved by prescribing physician**

Aggrenox: Stop three (3) days to five (5) days prior to EGD- **only if approved by prescribing physician**

Xarelto/Savaysa: Stop three (3) days before EGD- **only if approved by prescribing physician**

Dialysis Treatment: Alternate treatment may be used.

****Anti-Seizure Medication:** Take at least 2 hours before the scheduled EGD with a small sip of water.

****Blood Pressure/Heart Medication:** Please take your morning dose at least 2 hours before your EGD with a small sip of water.

Insulin: You may need to adjust your insulin dosages. Please speak with your monitoring physician for further instructions. **Ask your physician when to resume your insulin.**

Inhalers: Please bring your "rescue" inhaler to your appointment, even if you have not needed to use it for some time.

Heart Valve Replacement/ Pacemaker with Internal Defibrillator

7 – 10 days before EGD

Stop your *PPI (Nexium, Prilosec, Omeprazole, Zegrid, Prevacid, Lansoprazole, Protonix, Pantoprazole, Aciphex, Dexilant)

****Note: you can take medications such as Zantac, Pepcid, Tagamet, Axid and antacids such as Maalox, Rolaids, Tums and Mylanta. It is critical that all of the instructions are followed for an accurate result.**

DAY BEFORE EGD

If you have been holding your Coumadin/Jantoven/Warfarin you will need a PT/INR (lab test) taken 24 hours prior to exam if requested by physician.

DAY OF EGD

1. Nothing by mouth after midnight except approved **medications listed above**** with a sip of water. You may brush your teeth and rinse with water. **NO GUM, MINTS OR LOZENGES. NO CHEWING TOBACCO**
2. **You will be medicated and you need to bring someone with you to drive you home.**
3. Bring a current list of medications; if Menstruating please use a tampon if possible.

On the day of your procedure, report to the following unless otherwise instructed by your physician:

Check in at St Francis Hospital 1st Floor Registration

Check-in Date: _____

Check-in Time: _____

KMC Gastroenterology, 785-354-8518

If you are unable to keep your appt, please notify the office within 48 hours prior to your scheduled procedure.