

EGD Bravo Preparation

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Procedure Location:

___ North Richland Hills
Endoscopy Center I 7640
NE Loop 820 North Richland
Hills, TX 76180 | 469-713-
3740

___ Texas Health Harris
Methodist I 1301
Pennsylvania Avenue Fort
Worth, TX 76104 | 817-250-
2000

___ Medical City Fort Worth I
900 8th Avenue Fort Worth,
TX 76104 | 817-336-2100

___ Methodist Mansfield
Medical Center I 2700 E.
Broad St. Mansfield, TX
76063 | 682-242-2000

___ Texas Health Azle I 108
Denver Trail Azle, TX 76020
| 817-444-8600

Procedure Preparation:

- Seven days prior to the procedure: Stop all PPI medications (Dexilant, Pantoprazole, Omeprazole). If you start having worsening acid reflux, you may take OTC Zantac or Ranitidine until 48 hours prior to the procedure.
- You may take Tums or Maalox up to 1 day prior to procedure.
- Hold all anticoagulants or blood thinners, such as, Coumadin, Warfarin, Plavix, Eliquis, and Lovenox, for ___ days prior to the exam once approved by your cardiologist or primary care physician (PCP).

Day Before Procedure:

- Stop all antacid medications at midnight. The hospital will instruct you when you can restart your medications. Diabetic patients should only take a half dose of diabetic medications.
- DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT.

Day of Procedure:

- If possible, hold all medication unless otherwise directed. High blood pressure medication may be taken with a SIP OF WATER.
- Diabetic patients should not take diabetic medication the morning of the procedure. You can resume your normal dosing after the procedure once you have eaten.
- Plan on being at the facility for 2-3 hours.
- Someone must drive you home. No public transportation allowed without a chaperone. You will be sedated for your procedure and will be very drowsy for several hours. You may not drive or work for 12 hours after the procedure.
- You may have your throat sprayed with medication in the endoscopy suite to minimize your gag reflex.
- Follow discharge instructions given by endoscopy center staff regarding bravo recorder and symptom chart.

PROCEDURE DATE: _____ ARRIVAL TIME: _____ AM/PM