

UniversityGastroenterology

MEDICINE AT ITS BEST

HILL MEDICAL BUILDING • 1000 EAST GENESEE STREET • SYRACUSE, NY 13210

Information for You from Your Health Care Team

Patient Preparation For Savary or Balloon Dilation

Your procedure has been scheduled for _____ at _____ .
(date) (time)

Please arrive at the Endoscopy Reception area located on the second floor at _____ .
(time)

Instructions To Prepare For Your Procedure:

1. Do not eat or drink after midnight before the procedure.
2. Notify our practice **immediately** if you are taking any **Coumadin or Plavix**.
3. Notify our practice if you are a **Diabetic**.
4. You must have someone come with you to drive you home. You will not be allowed to leave alone.
5. On the day of your procedure, you will be asked to:
 - a. Sign an informed consent
 - b. Remove dentures or plate
 - c. Provide information concerning allergies to medications
 - d. Remove eyeglasses or contacts
6. The procedure takes approximately 30 minutes. When you feel well enough to leave and have discussed follow up with your physician, you will be discharged.

If you have any further questions, please call (315) 464-1600.