Bravo Discharge Instructions

Start Test Date: ___________ Time: ___________

Return Bravo Receiver by Date: ___________ Time: ___________ to:

DDA Office: 621 Ridgely Ave. Suite 201 (Second Floor) 410-224-4887
Return no later than 10:00 am. Must Return with Case and Strap.

Bravo pH Discharge Instructions:

- Do NOT take any antacids or anti-reflux medications during your study unless instructed to do so by your physician.
- You may have a vague sensation that something is in your esophagus.
- You may continue to eat your regular diet having 3 to 4 meals a day. Consume any liquids within 5-10 minutes. Do NOT sip on liquids or graze on food (popcorn, chips, etc) throughout the day. During the duration of the test do not eat gum or hard candy.
- Remove Recorder when bathing and sleeping. You may place the recorder on a vanity or bedside table. Make sure the recorder is kept completely dry by placing in a plastic sealable baggie when the recorder may be exposed to water.
- The recorder may beep if placed more than three feet away, if this happens, hold the recorder to the center of the chest for at least 3 seconds. To recalibrate. Once it is recalibrated the beeping will stop.
- The capsule will naturally fall off the wall of the esophagus and then pass through your digestive tract. You do NOT need to retrieve it.
- You should **not** have an MRI for 30 days after this procedure. If you must have a MRI, tell your doctor that you had the Bravo capsule placed. If you need a MRI emergently you may have an x-ray first to make sure the capsule has dislodged and exited your system.
- You can expect your results in approximately 10-14 days.
- If you have any questions, please call 410-224-4887.
The Bravo™ reflux testing system provides your physician with information regarding acid reflux into your esophagus. Test results are more accurate with your help in completing a detailed diary as well as following the instructions below:

☐ Your physician has asked that you continue your medication during testing.
   Please record in your diary any medication you take for your reflux.

☐ Your physician has asked that you discontinue your reflux medication for this test.
   Please do not take any prescribed medication for the treatment of your reflux during the testing period.

1. You must keep the recorder within 3 feet of you at all times during the testing period

2. If you should forget and move outside of a 3-foot radius of the recorder you may hear beeping for 30 seconds and the icon 1 (for 48-hour procedure) or 2 (for 96-hour procedure) disappears from the screen to indicate loss of communication. Move the recorder closer to you until the beep stops and the 1 or 2 icon reappears on the screen.

3. You may take a bath/shower during the testing period, but the recorder must not get wet and must remain within 3 feet of you. Please leave the recorder outside of the shower or tub while bathing.

4. Please use the symptom buttons on the recorder to record your symptoms during the testing period:

   **SYMPTOM BUTTON NOTE:**
   All button functions are active only when the backlight is ON. If backlight is OFF, pressing any of the enabled recorder buttons will first turn the backlight ON, but no function will yet be activated. Pressing the desired button a second time will activate the desired function.

   ![Symptom Icons]

   - Chest Pain
   - Regurgitation
   - Heartburn

5. Please remember to record all meals, drinks and snacks by pressing the Meal Button 1 once at the start of the meal and once at the end of the meal. In between the two presses, the button LED will blink until the button is pressed to mark the end the event.

6. You may drink whatever you like with meals and snacks (juices, soda, coffee, tea). Please drink limited amounts of plain water (not flavored) between meals and do not sip over long periods (plain water drinks do not need to be recorded). Please do not chew gum or eat hard candy during the monitoring period.

7. Press the Supine Button 1 once when lying down for bed and once at the end of the lying period. In between the two presses, the button LED will blink until the button is pressed to mark the end the event. **Note:** You need to record all of your up and down times – even quick trips to the restroom at night or lying down on the couch.

8. Please be sure to return your diary with your recorder at the end of the testing period. You should not have an MRI within 30 days from the day the Bravo™ reflux capsule was placed.

**Return the diary and recorder to:**
Place: __________________________ Date: __________________________ Time: ________________

If you should have any problems or questions during the study, please call: __________________________

**Caution:** Federal law restricts this device to sale by or on the order of a licensed healthcare practitioner. Rx only.

**Risk Information:** The risks of the Bravo™ reflux testing system include premature detachment, discomfort, failure to detach, failure to attach, capsule aspiration, capsule retention, tears in the mucosa, bleeding, and perforation. Endoscopic placement may present additional risks. Medical, endoscopic, or surgical intervention may be necessary to address any of these complications, should they occur. Because the capsule contains a small magnet, patients should not have an MRI study within 30 days of undergoing the Bravo™ reflux test. Please consult your physician for further information.