

HAL N. BUCH, MD, PC  
BOARD CERTIFIED GASTROENTEROLOGIST  
117 MARYS AVENUE, SUITE 201, KINGSTON, NY 12401  
PHONE: (845) 331-8146, FAX: (845) 331-3314

PATIENT NAME: \_\_\_\_\_

PROCEDURE: UPPER ENDOSCOPY\_\_\_\_ OTHER:\_\_\_\_\_

FACILITY: KINGSTON HOSPITAL\_\_\_\_ OTHER:\_\_\_\_\_

DATE OF PROCEDURE: \_\_\_\_\_ ARRIVAL TIME: \_\_\_\_\_

**AVOID aspirin/aspirin products, Advil/Motrin/Aleve/Ibuprofen, Vitamin E (multi-vitamins w/E), fish oil, flaxseed oil or foods with SEEDS for 5-7 days prior to procedure. (Tylenol and acetaminophen products are okay.)**

**\*\*YOU must consult your prescribing physician about stopping: Coumadin, Plavix, Pradaxa, Eliquis, or Xarelto, prior to a procedure if you take these medications or a generic equivalent.**

**\*\*YOU must consult your prescribing physician about diabetic medication and insulin dosages prior to a procedure if you are a diabetic.**

**YOU MUST HAVE SOMEONE TO DRIVE YOU HOME THE DAY OF PROCEDURE. NO DRIVING FOR THE REST OF THE DAY! YOU SHOULD HAVE ADULT SUPERVISION FOR 12-24 HOURS AFTER THE PROCEDURE.**

[ ] UPPER ENDOSCOPY PREP  
NOTHING TO EAT OR DRINK AFTER MIDNIGHT.  
NOTHING TO EAT OR DRINK UNTIL AFTER THE PROCEDURE.

**Only if ordered: After midnight, up to 4 HOURS PRIOR TO THE ARRIVAL TIME, you may have 1-8oz glass of the following: apple juice, white grape juice, tap or bottled water, Gatorade, Crystal Light. Avoid items with artificial red dye.**