



GOTHAM
GASTROENTEROLOGY

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UPPER ENDOSCOPY INSTRUCTIONS

Procedure Date/Time: _____ **Arrival Time:** _____

1. Do not eat or drink for at least 8 hours prior to your scheduled appointment.
2. Arrange to have an escort pick you up approximately 1 hour after your scheduled appointment to drive or assist you home.
3. You will not be allowed to drive for 12 hours after the procedure.