

The logo for SWE (Southwest Endoscopy) is a dark blue rectangle with the letters "SWE" in white, bold, sans-serif font. The letters are slightly shadowed, giving a 3D effect.

SWE

(EGD) Esophagogastro- duodenoscopy Prep

Location: Hospital

Please see the Procedure Location Letter

Please call to confirm appointment 505-999-1600 EXT 1631

NO SHOW FEE: Any patient who fails to keep their scheduled procedure will be charged a \$50.00 physician fee through our practice. Please note, the hospital may charge a separate fee not related to our practice. Our fee must be paid prior to rescheduling any appointments.

The following instructions are your physician's specific instructions. Please follow the instructions carefully to ensure a successful prep.

Cancellations: Must be made 4 business days prior to your scheduled procedure. Any cancellation made less than 4 business days.

PLEASE REVIEW THE INSTRUCTIONS **AT LEAST 1 WEEK PRIOR** TO THE PROCEDURE.

It is important that you follow these directions carefully and complete the entire preparation to ensure the most effective cleansing.

- If you are taking any blood thinners **AND** this was **NOT** discussed with your doctor's office at the time of scheduling the procedure, **please call us at least 5 days BEFORE starting the preparation.** These include, but are not limited to, Coumadin- (Warfarin), Plavix- (Clopidogrel), Xarelto- (Rivaroxaban), Pradaxa- (Dabigatran), Eliquis- (Apixaban), Arixtra- (Fondaparinux), Effient- (Prasugrel).
- If you are taking any insulin **AND** this was **NOT** discussed with your doctor's office at the time of scheduling the procedure, **please call your prescribing physician at least 5 days BEFORE** starting the preparation.
- You must **stop any iron supplements** (including in multivitamins) for **7 days BEFORE** the procedure.
- If you are taking any of the following **GLP-1 medications:** Dulaglutide- (Trulicity), Liraglutide- (Saxenda), Exenatide- (Byetta, Bydureon Bcise), Tirzepatide- (Mounjaro, Zepbound), Semaglutide- (Ozempic, Wegovy, Reybelsus), Lixisenatide- (Adlyxin), Albiglutide- (Tanzeum), **you must be on clear liquids ONLY the entire day prior to your scheduled procedure as the prep indicates. You must hold GLP-1 medications 1 week prior to the procedure. Failure to follow this instruction will result in your procedure being cancelled and all cancellation fees being charged.**
- **IF YOU ARE DIABETIC, DO NOT** take your diabetic pills the evening prior or day of the colonoscopy.
- **YOU MUST CONTINUE TO TAKE ALL** your other medications every day prior to the colonoscopy. It is **OK to take them with a small sip of water** on the day of your colonoscopy.
- You can continue aspirin, Tylenol and any NSAIDS (Ibuprofen, Motrin, Aleve, Naproxen, Celebrex, Mobic).
- Please plan to have someone drive you home after the procedure. **You will not be allowed to drive yourself home.** You **cannot take an Uber, Lyft, taxi, or public transportation home** from your procedure without an adult companion.

7 days prior to procedure	Day of procedure
<p>Special Notes: Let us know if you are on any of the following blood thinners: Plavix, Coumadin, Effient, Pradaxa, Eliquis, Xarelto or other blood thinning medications.</p> <p>Stop taking iron supplements or vitamins containing iron.</p> <p>Stop taking fish oil, krill oil or shark oil supplements</p>	<p>MORNING PROCEDURE (before 12:00pm): Do not have anything solid to eat or drink (no liquids) after midnight the night before your procedure. Take your usual medications at least 2 hours prior with small sips of water only. Do not skip heart, blood pressure or seizure medications. No gum, mints, candy, or tobacco products.</p> <p>AFTERNOON PROCEDURE (after 12:00pm): You may have a clear liquid breakfast. No solid foods, milk or milk products. Alcohol is not permitted Do not have anything solid to eat or drink (no liquids) for 10 hours prior to your procedure. No gum, mints, candy or tobacco products.</p> <p>Take your usual medications with small sips (no more than 2oz) of water at least 2 hours prior to your procedure.</p> <p>Do not skip any heart, blood pressure or seizure medications.</p>

Clear Liquid Diet Details: **NO RED or PURPLE. NO DAIRY**

Approve	Avoid
<ul style="list-style-type: none"> • Sodas, coffee, tea clear juices, fitness waters. • Popsicles without pulp. • Chicken, vegetable, and beef broth, Gelatin. 	<ul style="list-style-type: none"> • No milk/dairy • No juices with pulp • No RED or PURPLE



The Day Of The Procedure

All patients are required to check in for your procedure 60 minutes prior to the procedure time. If your procedure is before 7 AM, please check in at 6 AM.

TAKE YOUR BLOOD PRESSURE MEDICATIONS, HEART MEDICATIONS, OR SEIZURE MEDICATIONS AS PRESCRIBED **WITH A SMALL SIP OF WATER (no more than 2oz)** NO LATER THAN 2 HOURS PRIOR TO YOUR PROCEDURE OR YOUR PROCEDURE WILL BE CANCELED. YOU CANNOT HAVE CHEWING GUM, HARD CANDY, OR TOBACCO PRODUCTS THE DAY OF YOUR PROCEDURE.

You must arrange to have a responsible adult (18 or older) come with you to your procedure to drive you home. You are not allowed to drive, take a bus, or leave the facility alone. Your driver does not need to stay at our facility during your procedure but needs to remain reachable by phone. The staff will call your driver 30 minutes before you are ready to be discharged.

- You will need your current insurance card, picture ID, and copayment.
- Please leave all valuables at home or with your driver.
- If you are female under age 50 you may need to submit a urine specimen for a pregnancy test.

For questions regarding you prep please contact the number below.

GiftHealth Patient Support Call Center:

M-F 8AM-9PM EST

Sat 8AM-2PM EST

1-833-614-4438